



A decade of being there for you



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Annual Report 2009-2010

# Celebrating a decade

A tenth anniversary, sometimes referred to as the decennial anniversary, is a psychological milestone at which it is believed that a marriage, business, or organisation has matured.

Tin is the metal used to commemorate this auspicious occasion. Important to the search for gold and immortality, tin was once considered precious by alchemists and astrologers alike.

As the symbolic material of the milestone tenth anniversary, tin represents preservation and longevity.



# Annual Report 2009-2010

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“Once you have mastered time,  
you will understand how true it is  
that most people overestimate  
what they can accomplish in a year  
– and underestimate what they can  
achieve in a **decade.**”

**Anthony Robbins**

American advisor to leaders



A decade of **championing**



“An idea is worth nothing  
if it has no **champion**.”

**Anonymous**

## Profile

The Council for Medical Schemes (CMS) is the regulatory authority responsible for overseeing the medical schemes industry in South Africa. It administers and enforces the Medical Schemes Act 131 of 1998 (Act). The CMS is an autonomous public agency funded through levies charged to medical schemes. It is accountable to the Minister responsible for national health matters.

## Vision

Our vision is to regulate fairly and effectively in order to protect the interests of beneficiaries and to promote equity in access to medical schemes.

## Mission

The Council for Medical Schemes will act in an administratively fair and transparent manner, with integrity and professionalism, and will achieve this by:

- informing the public about their rights and obligations in respect of access to medical schemes;
- ensuring that all entities conducting the business of a medical scheme comply with the Medical Schemes Act;
- ensuring that complaints raised by the public are handled appropriately and speedily;
- contributing to the improved management and governance of medical schemes; and
- advising the Minister of Health of appropriate regulatory interventions that will assist in attaining national health policy objectives.

## Our approach

We act in an administratively fair and transparent manner, with integrity, professionalism, and respect.

We are conscious of the need to be cost-effective in the use of our resources and those of regulated entities.

We are proportionate in our actions and recognise the responsibilities of trustees.

We are mindful not to impede innovation unduly, and focus on facilitating fair competition.

# Our key strategic objectives

## Strategic objective 1

**We monitor the impact of the Medical Schemes Act, research developments, and recommend policy options to improve the regulatory environment.**

We conduct research into the impact that the Act is having on the key policy goals of reducing unfair discrimination in access to health insurance, improving access to prescribed benefits, and making information available on important trends in medical schemes.

## Strategic objective 2

**We secure an appropriate level of protection for beneficiaries of medical schemes and the public by authorising the conduct of medical schemes and monitoring their financial performance.**

We assess the financial performance of schemes and monitor their compliance with financial management standards to contribute towards a financially sound medical schemes industry. We also ensure that all entities conducting the business of a medical scheme are appropriately licensed to do so.

## Strategic objective 3

**We provide support and guidance to trustees and promote understanding of the medical schemes environment among trustees, beneficiaries, and the public.**

We assist with the training of trustees, provide advice, and work to improve the understanding of medical schemes among market participants. We also seek to increase our own understanding of the concerns and priorities of trustees and beneficiaries, and to be more responsive to their needs.

## Strategic objective 4

**We foster compliance with the Medical Schemes Act by medical schemes, administrators and brokers, and initiate enforcement action where required.**

In taking vigorous and timely enforcement action, we treat all parties fairly. We act with integrity and in a consistent manner. We regard vigorous enforcement as an important deterrent to undesirable behaviour and as a key to our credibility.

## Strategic objective 5

**We investigate and resolve complaints raised by beneficiaries and the public.**

We assist beneficiaries to achieve fair and unbiased outcomes when they lodge complaints against their medical schemes. We also contribute to the speedy resolution of appeals lodged with us or the independent Appeal Board.

## Strategic objective 6

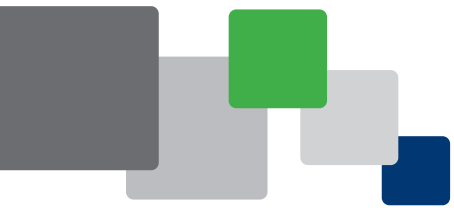
**We foster the continued development of the Council for Medical Schemes as an employer of choice.**

We maintain the CMS as an attractive place to work at by keenly focusing on our recruitment, remuneration, employee development, and equity strategies. We also seek to advance the values of teamwork and leadership, sharing, taking pride in our achievements, and doing things that improve people's lives. In addition, we strive to manage our financial resources in an impeccable manner and to enhance our business competence and effectiveness continuously through the use of appropriate information systems.

## Strategic objective 7

**We develop strategic alliances nationally, regionally, and internationally.**

We cooperate with and learn from the experiences of our regulatory counterparts at home and abroad so as to strengthen the health insurance regulatory system in South Africa.



A decade of **guiding**



## Chairperson's statement

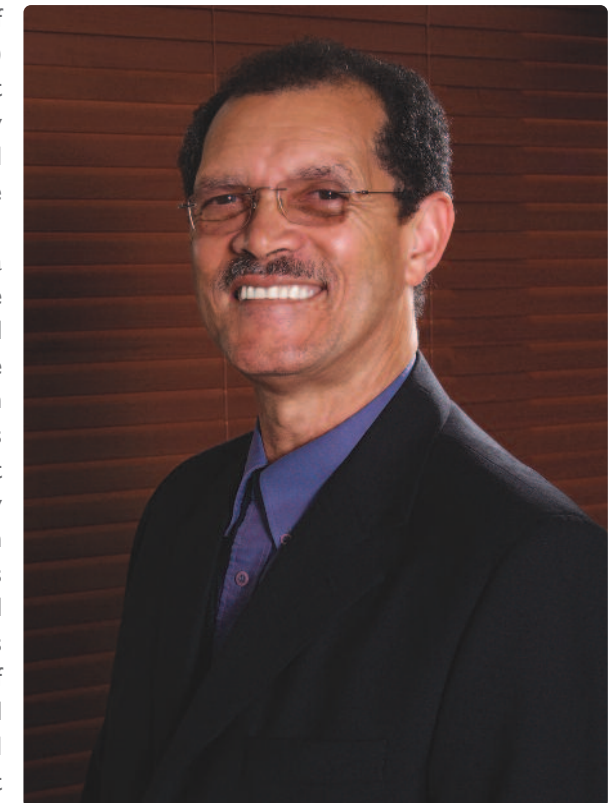
This year marks the tenth anniversary of the Council for Medical Schemes (CMS) which was established on 2 May 2000. It provides us with an excellent opportunity to not only review the preceding financial year but to reflect on the CMS and its role over the past decade.

The establishment of the CMS was a significant step in efforts to ensure the protection of the interests of medical scheme beneficiaries. These efforts have been continued over the 10 years in question and a few events bear witness thereto, including our ongoing involvement in the consultative process aimed at clearly demarcating medical schemes from health insurance in order to protect beneficiaries from the encroachment of risk-rated health insurance products into the business of medical schemes. The danger of cream-skimming, unfair discrimination, and the sustainability of the medical schemes industry makes this an important intervention.

The Risk Equalisation Fund or REF marks another important development and remains a top priority as it promises to protect medical schemes with sicker and older members, thus addressing the systemic discrimination which prevails against such members in the current unequalised medical schemes environment. A key principle underpinning the Medical Schemes Act is that of community rating and REF is central to the full implementation thereof.

The past decade has also seen increasing efforts by the CMS to strengthen the governance structures of medical schemes. More effective governance frameworks enable trustees to look after the interests of their members, thus easing the burden on the regulator. Given the weaknesses identified in the current legislative framework, amendments have been proposed to facilitate the emergence of more effective governance arrangements.

Another key area of involvement has been ongoing efforts to establish an appropriate regulatory framework for low-income medical schemes (LIMS). The absence of such a framework results in the denial of risk-pooling opportunities to low-income individuals, and is thus unfair.



“True leadership lies in  
**guiding** others to success.  
In ensuring that everyone  
is performing at their best,  
doing the work they are  
pledged to do and doing  
it well.”

**Bill Owens**

American politician

The promulgation of a regulatory exemption framework for LIMS remains urgent to promote risk-pooling and pre-empt their emergence as risk-rated health insurance products. The CMS has facilitated a stakeholder consultation process for the development of proposals to promote the emergence of LIMS.

Our efforts are also directed at monitoring and addressing the problem of cost escalation in the industry, especially among private hospitals and medical specialists, which leads to increasing contributions, the erosion of other benefits, and financial difficulties of medical schemes. This problem is exacerbated by the absence of a regulatory framework for collective bargaining between schemes and providers. We have recommended the initiation of a proper consultative and research process towards the development of such a regulatory framework for collective bargaining between healthcare providers and funders, including a review of the National Health Amendment Bill.

Another priority for the CMS has always been and still is addressing the absence of effective supply-side regulation, especially in relation to private hospitals, which has resulted in an oligopoly of private hospital groups and specialist groupings averse to contracting with medical schemes. We have recommended supply-side reforms, including a review of the hospital licensing framework, statutory prohibitions against perverse pricing practices, and a review of the public sector means test.

It is unfortunate that the provincial health services are still not able to engage in effective contracting with schemes; this challenge remains high on our priorities list.

We have initiated consultative processes to propose the revision of the regulatory framework for the remuneration of healthcare brokers which currently is not supportive of independent advice to consumers. We also propose the promulgation of “fit and proper” standards for trustees which will form part of strengthened scheme governance.

The CMS has consistently initiated and supported efforts aimed at ensuring the long-term sustainability of medical schemes in South Africa. In order to facilitate this, guidance and support are provided to medical schemes and the organisations affiliated with them to ensure that they are well-managed and financially sound. This is not only for their own good; a well-run industry with healthy governance structures in place guarantees that beneficiaries are treated fairly too.

Registering schemes – including the restricted Government Employees Medical Scheme (GEMS) responsible for significant growth in the number of beneficiaries – and accrediting administrators, managed care organisations, and healthcare brokers is all part of our daily job. We have, in the last few years, also improved the systems for the registration of scheme rules, and will continue to do so.

The improvement of systems for the closer financial oversight of medical schemes, including risk mitigation plans for high-impact schemes, online quarterly returns and financial reports, and monthly monitoring of schemes in “ICU”, has been another milestone for us.

One of the highlights of the last decade has been the fact that our interventions have resulted in expenditure levels of schemes decreasing in real terms, especially since 2006.

And although cost increases in the industry have been contained, a value for money concern remains which must be addressed through measures aimed at achieving efficiency gains.

The CMS continues to conduct research on the industry and one of the more interesting findings is that prescribed minimum benefits do not contribute to cost increases, which is the popular belief. A joint process with the Department of Health to review and improve these benefits is currently underway.

Ultimately, our participation in regulatory and policy developments in the health and insurance industries ensures that the rights of every South African are protected at all times.

As regulator we believe that we should set the example. We are proud of the fact that the CMS has received unqualified audits by the Auditor-General from its inception in 2000 to the last financial year, 2010.

The occasion of the tenth anniversary of the CMS affords me an opportunity to express my heartfelt gratitude to all the Principal Officers, trustees, administrators, managed care organisations, brokers (and broker firms) and other industry stakeholders for their continued cooperation over the last financial year and preceding decade. Regulating comes with its fair share of challenges, but it is so rewarding when those you work with give you the necessary support.

My fellow Councillors are thanked for their unwavering commitment and untiring support for the causes of the CMS.

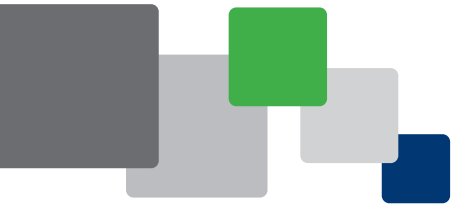
The financial year reported on here saw two acting Registrars guiding the organisation. They have more than earned our thanks as they steered the CMS most ably during this time. I wish, on behalf of Council, to express our heartfelt appreciation for the sterling efforts of Mr Patrick Matshidze and Mr Craig Burton-Durham.

Any organisation is only as good as its people. I thank staff at the Office of the Registrar for the opportunity to report on their efforts and achievements in the period under review. Many members of staff have been with the CMS from the very beginning; a special word of appreciation goes to each of them.

This tenth year of the CMS also provides me with the opportunity to welcome on board the new Registrar of Medical Schemes and Chief Executive of the CMS, Dr Monwabisi Gantsho, who joined us on 1 June 2010. On behalf of Council, I pledge our support and look forward to working with you as we take the CMS into another exciting decade.

We are also looking forward to strengthening our relationships with the Ministry of Health and the many other stakeholders and individuals who share our commitment to promoting equitable access to private health financing.

This Annual Report provides a brief overview of our achievements over the past decade. There is much more that can be said, but it is no overstatement to say that the CMS has come a long way in a short period of time. The next decade will prove as challenging and exciting as the first and I have little doubt that we will rise to the occasion as we increase our efforts to ensure that all South Africans enjoy access to quality healthcare.



I believe that this Annual Report provides a fair and transparent representation of the activities and financial performance of the CMS in its 2009-2010 financial year and of medical schemes during 2009.

I hope that readers will find the material contained herein both useful and interesting.

Prof. William Pick  
Chairperson  
Council for Medical Schemes  
14 July 2010



A decade of **listening**

“Courage is what it takes to stand up and speak; courage is also what it takes to sit down and **listen.**”

**Winston Churchill**

Former Prime Minister of Britain

## A message from the new Registrar

Dr Monwabisi Gantsho was appointed the second Registrar of Medical Schemes and Chief Executive of the Council for Medical Schemes on 1 June 2010. This special edition of our Annual Report in which we celebrate our first decade of challenges and achievements would be incomplete without a few words from the new man in charge of a dynamic, multi-billion Rand industry which touches the lives of millions of people.

Having qualified and practised as a medical doctor, and in the various positions he has held until now, Dr Gantsho has dedicated his entire life to helping people. His new leadership role at the regulatory body overseeing the medical schemes industry is perhaps best described as merely a diversification of his commitment to improving the lives of others. At the helm of the Council for Medical Schemes, his new responsibility for the most part is protecting those who often do not realise that they need to be protected: the beneficiaries of medical schemes and the public.



A message  
from the new  
Registrar

### The new Registrar speaks out

“The mandate of the Council for Medical Schemes is prescribed in the Medical Schemes Act and it is clear: we are here primarily for the beneficiaries of medical schemes. At the same time, and to be fair, we extend a hand of friendship to medical schemes and the businesses affiliated with them; we observe and guide their collective efforts to create an industry which is sustainable in the long run and where human rights are respected and business practices are healthy too. We will continue to regulate those who fall within our jurisdiction without fear or favour.

“We are also acutely aware of the need to expand the access to quality care to many more South Africans. We have therefore pledged our ongoing and unwavering support to the process of developing a National Health Insurance system for our country. It is, in fact, one of our duties – and a welcome one at that – to advise the Minister of Health on possible interventions



aimed at the full realisation of national health policy. We will do everything in our power to support the process aimed at ensuring universal access to quality care in South Africa. I believe we have the knowledge, capacity, and experience to assist where we are required to do so.

“We stand firm and committed to the regulatory responsibilities as they pertain to beneficiaries, medical schemes, and the broader health insurance industry.

“I intend to lead the team in an efficient and effective way to achieve a bigger, better, and stronger Council for Medical Schemes.”

**Dr Monwabisi Gantsho**  
**Registrar of Medical Schemes**  
**20 July 2010**



A decade of **protecting**



“Power is no blessing in itself,  
except when it is used to  
**protect** the innocent.”

**Jonathan Swift**

Irish author

As we enter the 10th anniversary year of the Council for Medical Schemes (CMS), it is opportune to reflect on our achievements during the past decade while remaining mindful of both current and new challenges in ensuring that our regulatory mandate continues to be effectively and efficiently discharged. To this end, this review is divided into three sections dealing with “visiting the past”, “the period under review (our 2009-2010 financial year)”, and “looking to the future”. In addressing the period under review, our performance will be assessed against our seven strategic objectives.

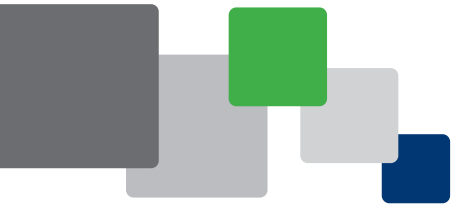
## Visiting the past

In the 10 years since the inception of the CMS, the Office of the Registrar continued to successfully discharge its statutory mandate by ensuring that the interests of members of medical schemes are jealously guarded, and that the industry is effectively and efficiently regulated. The protection of beneficiaries, prescribed minimum benefits (PMBs), good governance, and healthy solvency have remained a focal point throughout.

Our achievements include the introduction of the Medical Schemes Act (Act 131 of 1998) in 2000 which lead to the implementation of open enrolment, community rating, and PMBs. We have improved the monitoring of financial soundness and regulatory compliance by undertaking a major revision of the online statutory returns required to be furnished by medical schemes, ensuring the appropriate use of reinsurance by issuing reinsurance guidelines, introducing an early warning system and Risk Assessment Framework (RAF) to aid in early detection of declining financial soundness and aiding the management of schemes by categorising them into impact bands, and the continued improvement in the solvency of schemes.







Over the years we have developed an accreditation database which facilitates the accreditation of healthcare brokers, broker firms, administrators, and managed care organisations. We have initiated a framework whereby the approval of rules submitted for amendment by schemes is expeditiously dealt with and contribution increases are restricted to current inflationary trends.

Proper governance in medical schemes continues to be ensured by various interventions. We have promoted understanding of the medical schemes environment through an active consumer education programme. We have introduced a framework for the adjudication of complaints, and we serve as custodian of the ICD-10 (International Classification of Diseases – 10th Revision) coding standard and assist with its implementation through actively participating in the activities of the National Task Team on ICD-10.

Our staff members participate in study tours and exchange programmes to further enhance research and monitoring of the medical schemes industry. We cooperate closely with the National Department of Health in developing and supporting legislative and policy processes. Another achievement has been preventing perverse incentives by placing limitations on the quantum of commission payable to brokers.

In response to concerns arising from the disposal of assets of self-administered schemes, we have published undesirable business practice declarations. We have expanded the PMB for HIV/AIDS to include provision of antiretroviral therapy within the parameters of the national treatment guidelines applicable in the public health sector. We have initiated a framework for the implementation of the Risk Equalisation Fund (REF).

In pursuing our ongoing effort to be an employer of choice, we have in recent years focused keenly on developing and adopting an integrated approach to talent, succession, and career strategies to ensure that the CMS employs the right people, with the right attitude and approach to fulfill its mandate and strategic objectives. A considerable amount of work has also been done over the past 10 years towards the promotion of our culture and values.

In conclusion I can confidently say that great strides were made during the past decade towards ensuring that beneficiaries are protected in a well-regulated environment.

## Reflecting on the present: the period under review

In the financial year 2009-2010 the Office again rose to the challenge of regulating this complex and dynamic industry, with critically important issues – such as the right of members to obtain unfettered access to PMBs and ensuring the proper governance of schemes – being key focus areas. A number of projects reported on in the previous Annual Report have either been finalised in the period under review or continue to be monitored and reported on.

The protection of beneficiaries remained a central theme of regulation, with the protection of risk pools, scrutiny of scheme marketing material, and non-healthcare expenditure also enjoying emphasis.

A young girl with dark hair and a red earring is shown in profile, blowing a dandelion seed head. The background is a bright, sunny field of green grass with many dandelion seeds floating in the air. The word "monitor" is written in large, light blue letters at the top right.

# monitor

1  
Strategic  
objective

We monitor the impact of the Medical Schemes Act, research developments, and recommend policy options to improve the regulatory environment.





# Regulatory and policy developments

## National Health Amendment Bill

This Bill is administered by the National Department of Health. It was withdrawn from Parliament in 2008 and has not yet been reintroduced.

## Medical Schemes Amendment Bill

Attempts to have this Bill passed were again unsuccessful due to it not being processed by Parliament; it accordingly lapsed. We are, however, confident that the Bill, which seeks to introduce much-needed legislative amendments in critical areas – such as the definition of the business of a medical scheme, the Risk Equalisation Fund, medical scheme governance, low-income benefit options, and the design and structuring of options – will be successfully passed into law in the forthcoming financial year.

## Demarcation

The jurisdictional delineation between the regulatory span of control of the CMS and that of the Financial Services Board (FSB) has been an important area of focus in our 2009-2010 financial year. The effective regulation of medical schemes and the protection of beneficiaries are critically dependent on all entities and products seeking to do the business of a medical scheme being subjected to the rigorous oversight and strict protections contained in the Medical Schemes Act. A serious threat is posed to the sustainability of medical scheme risk pools by the recent proliferation of insurance products which seek to encroach on the preserve of medical schemes. So we have continued to participate in the demarcation work group established by National Treasury as part of the process of drafting regulations in support of certain amendments effected to the Long- and Short-Term Insurance Acts of 1998 by the Insurance Laws Amendment Act (Act 27 of 2008). The work group comprises stakeholders from industry, government, and regulatory authorities, and has as its purpose consideration of the underlying principles required to inform the drafting of regulations to ensure that a clear delineation of products is achieved so that the purpose of the Medical Schemes Act is not undermined.

# Risk Equalisation Fund (REF)

The implementation of REF, which seeks to equalise the risk faced by medical schemes in respect of providing PMBs, did not proceed. This is because the Medical Schemes Amendment Bill, which contains crucial provisions for the implementation of REF, was not considered by Parliament. As a result the planned organisational building activities were not implemented. The capacity required to evaluate REF returns and continue with the REF shadow process has, however, been maintained.

# PMB review process

Comments from stakeholders were taken into account following the publication of the third draft of the PMB review consultation document on the CMS website wherein an essential healthcare package was proposed as the future PMB package. We developed an economic model to evaluate the impact which the new essential healthcare package would have on industry; we found that implementing the package in the absence of risk equalisation would have a negative effect on industry. In the period under review, we established 13 clinical advisory committees, chaired by academic health professionals, to advise the PMB review steering committee on the improvement of the existing PMB Chronic Diseases List (CDL) algorithms and the development of new algorithms, clinical guidelines, and benefit definitions. The steering committee finalised the current phase of the PMB review process and presented it to Council, who accepted the recommendations. Draft regulations were submitted to the Minister of Health for consideration and possible publication in the *Government Gazette* for public comment. The committee also engaged with the provisions of PMB regulations, including the “payment in full” provisions contained in regulation 8 of the Medical Schemes Act.

# Non-compliance with PMB legislation

An explorative study commissioned in the last financial year to gain an understanding into how PMBs are implemented by medical schemes, revealed that a substantial portion of claims for PMB conditions was being paid from the personal medical savings accounts of members, or on an out-of-pocket basis, or not at all. Failure to fund PMBs from the risk pool constitutes a transgression of the Medical Schemes Act and results in the erosion of benefits. It was indicated in the previous review that the CMS was developing appropriate interventions. Subsequent evaluations conducted during the period under review revealed extensive, systemic non-compliance with PMB legislation by medical schemes. This resulted in the acting Registrar issuing Circular 37 of 2009 (all Circulars are available on our website) which required schemes and administrators to ensure full compliance with PMB provisions as provided for by the Act and regulations, failing which a formal declaration of non-compliance was required to be made to the Office. Most schemes and administrators approached the Office to confirm that they were not compliant with the legislation. The convening of a task team comprising representatives from the CMS, Health Professions Council of South Africa (HPCSA), the Department of Health, schemes and administrators, healthcare providers (including the Hospital Association of South Africa), beneficiaries and consumers to develop a code of conduct for industry to ensure full compliance with PMB provisions was subsequently facilitated.

Registrar's review



## National Health Insurance

The CMS has continued to support the National Department of Health in the establishment of a National Health Insurance (NHI) system as part of its health reform process in pursuit of universal healthcare for all. We are represented on the Ministerial Advisory Committee on NHI by the Chairperson of Council. The Office has also supported the work of this committee at a technical level.

## Monitoring ICD-10

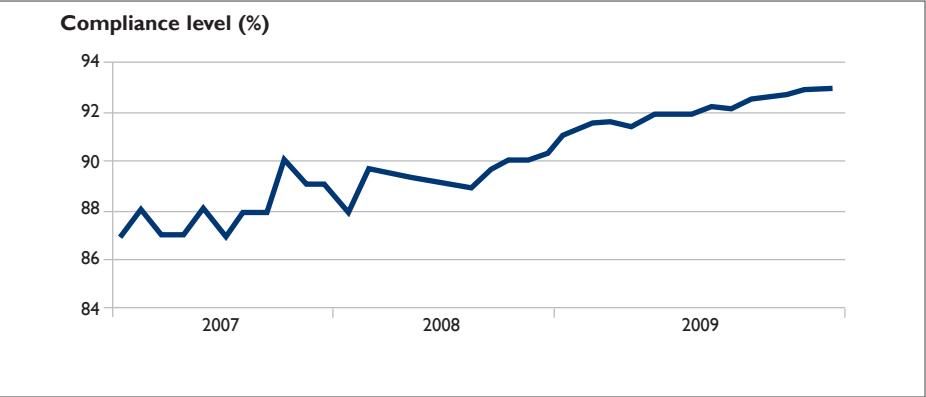
ICD-10 is a diagnosis coding standard owned and maintained by the World Health Organisation (WHO). It was adopted by the National Health Information System of South Africa (NHISA) and forms part of the health information strategy of the Department of Health. The standard currently serves as the diagnosis coding standard of choice in both the public and private sectors.

The rationale behind the implementation of ICD-10 is fourfold. Firstly, there was a need to standardise data collection processes in the industry. Secondly, regulation 5(f) of the Medical Schemes Act prescribes the manner in which providers of health services must submit claims. Thirdly, there was a need to facilitate an efficient reimbursement system for providers that was consistent with legislation while improving risk management practices by medical schemes. Finally, the introduction of the Medical Schemes Act in 2000 saw the emergence of a minimum set of guaranteed benefits to be covered by schemes, the PMBs. Entitlement to these benefits is diagnosis-driven and is appropriately identified using ICD-10.

Compliance by healthcare providers with ICD-10 coding has increased from 87% at inception to more than 90% in 2009, as illustrated in Figure 1.

In conjunction with the Department of Health, we commenced a process to update the ICD-10 browser and the Master Industry Table (MIT).

Figure 1: ICD-10 valid claims submissions 2007-2009



## Cost containment

Increasing costs have become a topical issue in recent years – and they continue to plague the medical schemes environment. Since identifying cost containment as a pillar for systemic regulatory intervention in 2006, we have implemented various initiatives in an attempt to formulate a comprehensive response to cost escalation. A key recommendation is the establishment of a bargaining mechanism to determine prices in the private healthcare sector. In addition, we have focused on clinical and epidemiological factors to assess their impact on overall healthcare costs.

### Covering non-PMB conditions

Medical schemes typically respond to cost escalation by either increasing contributions or reducing benefits. The extent to which benefits can be reduced is limited by the PMB provisions in the Act and regulations. Schemes, however, remain at liberty to adjust levels of cover for non-PMB conditions.

In the financial year under review we undertook a project directed at better understanding the changes in the coverage for non-PMB conditions. Such cover was found to have been eliminated altogether in lower-level options. The impact of reducing cover for non-PMB conditions ultimately results in de facto risk-rating by medical schemes whereby members are compelled to enrol in more comprehensive options to access these benefits. In addition, members on low-level options who cannot afford to move to more comprehensive options face a disproportionate burden in terms of out-of-pocket expenditure. Also, the practice by medical schemes to locate cover for non-PMB conditions in more comprehensive options encourages adverse selection, whereby potentially high claimers deliberately allocate themselves to these options. We will take these findings into consideration when recommending legislative revision of the PMB framework and the registration of rules and benefits.

## Practice Code Numbering System (PCNS)

We granted approval for the Board of Healthcare Funders of Southern Africa (BHF) to continue administering the Practice Code Numbering System (PCNS). The Medical Schemes Act requires that a healthcare provider wishing to obtain direct reimbursement from a medical scheme must furnish an account which reflects a valid Practice Code Number in order to be validly compensated.

# protection

Strategic  
objective

2

We secure an appropriate level of protection for beneficiaries of medical schemes and the public by authorising the conduct of medical schemes and monitoring their financial performance.





Most rule amendments for the 2010 financial year applicable to schemes were approved and registered by 31 December 2009. The Office increased the requirement for completeness of information regarding proposed increases to contributions. The additional appendices and reports now required have enabled the Registrar to be better informed when considering proposed changes to contributions and benefits.

## Status of schemes

The total number of registered medical schemes dropped from 110 in January 2009 to 105 in January 2010 (4.5% decrease). The number of open schemes reduced from 32 in 2009 to 30 in 2010 (6.3% decrease), with restricted schemes falling from 78 to 75 (3.8% decrease) during the same period. These figures include schemes which affect their contributions mid-year.

## Status of options

Schemes continued to consolidate in 2009; this trend results in fewer benefit options. The total number of registered benefit options decreased from 351 in January 2009 to 332 by January 2010. This represents a drop in the number of options in open schemes from 190 to 174 between 2009 and 2010, and a drop in the number of options in restricted schemes from 161 to 158 during the same period.

Table 1: Options as at 1 January 2010

Status of option	Open schemes options	Restricted schemes options	Total
Options registered in 2009	190	161	351
Discontinued options	-17	-3	-20
Discontinued options due to scheme mergers and combining options within schemes	-4	-2	-6
Discontinued options due to scheme liquidation	-5	-1	-6
New options	11	3	14
Options with mid-year contribution changes	0	-24	-24
Options not registered	-1	0	-1
Reviewed and approved options as at 1 January 2010	174	134	308
Options with mid-year contribution changes	0	24	24
Registered options January 2010	174	158	332

## Contributions

The average gross contribution increase for all schemes in 2010 was 13.0%. The comparative increases for open and restricted schemes were 14.3% and 12.4% respectively. Gross contribution increase is based on the actual number of principal members and adult and child dependants; it accordingly represents the actual increase per family<sup>1</sup> across all schemes in 2010. The average contribution increase was 12.4% per principal member, 12.6% per adult dependant, and 16.3% per child dependant. In open medical schemes, it was 12.7% per principal member, 12.0% per adult dependant, and 11.8% per child dependant. In restricted medical schemes: 11.9% per principal member, 13.8% per adult dependant, and 22.9% per child dependant.

### Gross contributions: year-on-year percentage rate changes

In 2010 the average monthly gross contribution for a principal member was R1 373; an adult dependant paid an average of R1 177 per month and a child dependant R413. A family contributed on average R991 per month towards their medical scheme in 2010. The breakdown of the gross contribution rates in open schemes was R1 441 per principal member, R1 245 per adult dependant, and R399 per child dependant. A family contributed an average of R1 049 per month. In restricted schemes, the numbers looked as follows: R1 246 per principal member, R1 044 per adult member, and R433 per child dependant. A family on average contributed R889 per month.

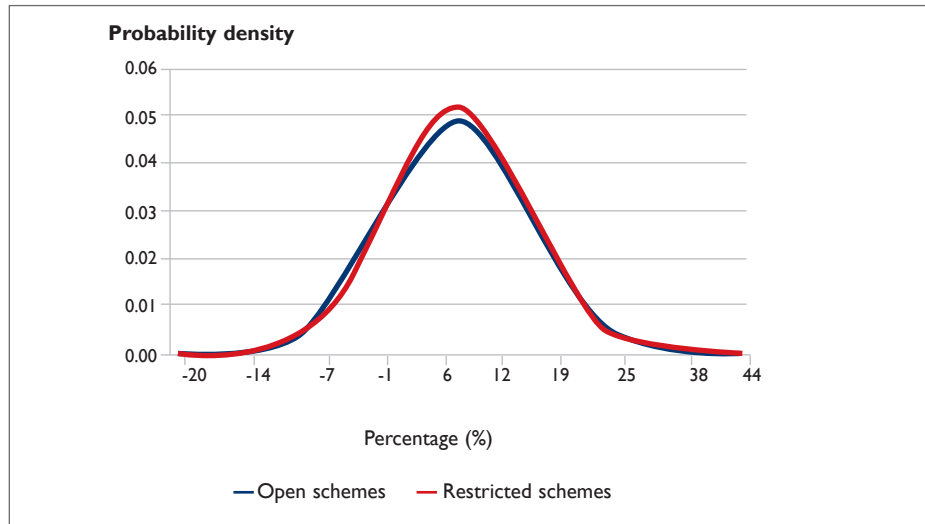
### Risk contributions: year-on-year percentage rate changes

The average risk contribution increase for all schemes in 2010 was 13.7%. The comparative increases for open and restricted schemes were 15.7% and 12.7% respectively. The principal member, adult dependant, and child dependant risk contribution percentage increase for all schemes was 13.0%, 13.3% and 17.2% respectively. The principal member, adult dependant, and child dependant risk contribution percentage increase for open schemes was 13.0%, 12.3% and 11.9% respectively; in restricted schemes the numbers were 13.0%, 15.6% and 24.7% respectively.

<sup>1</sup> Family size used to calculate the increase for the year is based on the actual number of principal members and their dependants in medical schemes during the assessment of benefits and contributions for 2009-2010.



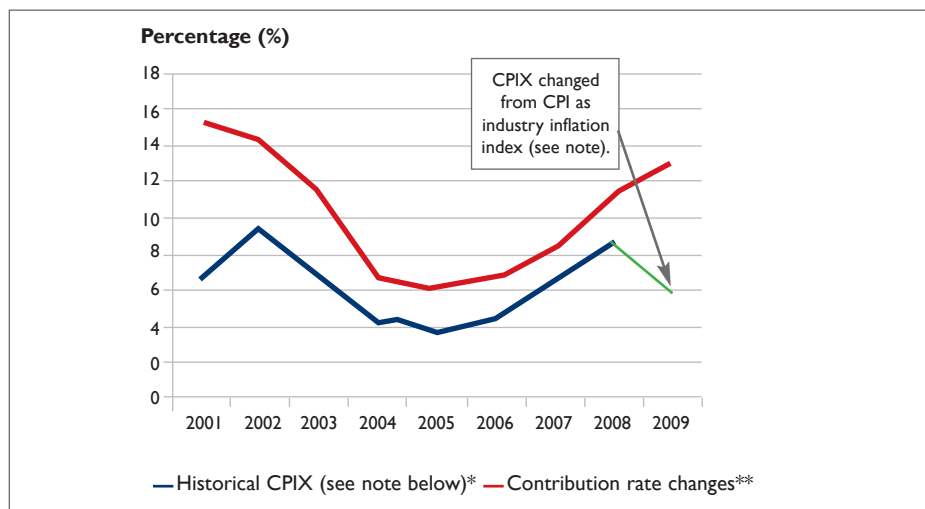
Figure 2: Normal distribution of contribution rate changes



The two graphs in Figure 2 are the fitted normal distributions for increases to open and restricted medical schemes. The increases are calculated on the weighted average of contribution rate changes where the weight used is the family composition of principal member and dependants.

## Contribution rates relative to general price indicators

Figure 3: Contribution rate changes, CPI and CPIX



\* Historical CPIX is based on the year-to-date increase in the CPIX index for October in the preceding year. This is due to the timing of the calculation of the proposed contribution increases. The CPIX figure for 2009 is based on the rebased CPI figure as at October 2009.

\*\* Year-on-year rate changes of average contributions

The average contribution changes since 2002 through to the present have continued to track CPIX (CPI excluding interest rates on mortgage bonds). The trend noted for the past nine years, of open scheme contribution increases being higher than those of restricted schemes, continued in the period under review.

## Evaluating other scheme rules

Amendments to scheme rules were evaluated and registered if they complied with the requisite standards. These included mid-year contribution and benefit changes, new options, and efficiency-discounted options for a number of schemes.

Schemes also applied for amendments to their rules regarding:

- the National Health Reference Price List (NHRPL)/scheme reimbursement rate;
- eligibility criteria for membership of restricted schemes;
- moving AGMs as a result of the FIFA Soccer World Cup;
- changes in physical address;
- clarification of PMBs;
- clarification of designated service providers (DSPs);
- changes to governance structures; and
- clarification of processes with respect to amalgamations and liquidations.

A number of applications for rule amendments were rejected for the following reasons:

- amendments to the eligibility clause for restricted schemes\*;
- non-compliance with statutory requirements regarding the provision for PMBs (regulation 8 of the Act);
- unfair and/or discriminatory rules in contravention of sections 31(3)(a) and 29(1)(n) of the Act;
- inconsistencies/ambiguity with existing registered rules;
- poor motivation for proposed contribution changes;
- proposed rules not complying with legislation;
- unfairly high contribution changes;
- poorly defined benefit entitlements;
- low membership numbers; and
- failure to meet conditions regarding financial performance.

\* An increase in proposed rule amendments seeking to widen the eligibility criteria for restricted schemes was noted with concern in the period under review. In the majority of these instances, the proposed eligibility amendments seek to discriminate against certain sections of the industry by creating opportunities for these schemes to distort the underlying profile of open schemes versus the restricted schemes environment.



The following schemes are required to submit monthly management accounts to the Office of the Registrar to enable us to continue monitoring them and/or their new options:

- Bankmed
- Bestmed Medical Scheme
- Bonitas Medical Fund
- Community Medical Aid Scheme
- Compcare Wellness Medical Scheme
- Discovery Health Medical Scheme
- Hosmed Medical Scheme
- Ingwe Health Plan
- Liberty Medical Scheme
- Minemed Medical Scheme
- Momentum Health
- National Independent Medical Aid Society (NIMAS)
- Nedgroup Medical Aid Scheme
- Oxygen Medical Scheme
- Profmed Medical Scheme
- South African Municipal Workers Medical Scheme (SAMWUMed)
- Suremed Medical Scheme
- Topmed
- Umvuzo Health Medical Scheme

The Council granted various exemptions during the period under review. These included interim exemptions from PMB provisions by schemes which had converted from the bargaining council environment, and exemptions to schemes providing options that allowed for efficiency discounts based on the provider choice offered.

## Engagement with schemes

During the period under review we received applications for the registration of two new medical schemes. The application of Rand Mutual Association (RMA) is still in progress as there is material information outstanding on the proposal. The application of Getmed is under consideration as the Office is still evaluating its compliance with the Medical Schemes Act.

## Amalgamations

The Office dealt with three amalgamations in the 2009-2010 financial year, all taking effect from 1 January 2010:

- Liberty and Medcover amalgamated into Liberty.
- Bestmed and Telemed amalgamated into Bestmed.
- Medcor transferred into GEMS.

## Proposed amalgamations

In 2009-2010 we again dealt with certain proposed amalgamation partners and consulted with them on the requirements and guidelines in respect of proposed amalgamations.

The following schemes were consulted:

- Discovery Health and Afrisam on the proposed amalgamation of Afrisam into Discovery Health with effect from 1 June 2010.
- Discovery Health and Umed on the proposed amalgamation of Umed into Discovery Health with effect from 1 July 2010.
- Momentum Health and Ingwe on the proposed amalgamation of Ingwe into Momentum Health with effect from 1 August 2010.
- Medshield and Oxygen on the proposed amalgamation of Oxygen into Medshield with effect from 1 October 2010.

## Liquidations

Renaissance Health Medical Scheme was liquidated after a curator appointed by the High Court failed to return the medical scheme to solvency. The joint liquidators of the scheme have during the period under review investigated the role of various parties involved in the management, oversight, and administration of the scheme, including the conduct of the curator.

Poor corporate governance had resulted in the Board of Trustees (BoT) and Principal Officer (PO) failing in their duty to exercise proper oversight in carrying out their fiduciary responsibilities towards the scheme and its members by allowing the administrator, Prosperity Health, to grant members authorisation to undertake certain procedures under circumstances where insufficient funds were available to the scheme to meet these obligations. The Board furthermore had no proper knowledge of the financial status of the scheme. This resulted in members being severely prejudiced due to service providers holding them liable for the payment of accounts for services which they had reasonably expected would be paid by the scheme. This conduct forms a substantial part of the investigation by the joint liquidators referred to above. It is anticipated that legal action will be instituted against any parties which are culpable. As far as the administrator is concerned, an investigation conducted by our Accreditation Unit resulted in the accreditation of Prosperity Health being withdrawn. Prosperity Health have to date not challenged this decision.



Solvita Medical Scheme was liquidated in the period under review as a result of its inability to sustain itself financially or to obtain the requisite minimum membership in terms of its conditions of registration.

Purehealth Medical Scheme applied for voluntary liquidation due to its declining membership and solvency. The scheme liquidated voluntarily as it was unable to sustain itself financially or to obtain a suitable amalgamation partner to ensure that the rights and benefits of its members were protected.

## Efficiency discounts

Council has – since the concept of efficiency-discounted benefit options was first introduced – allowed two schemes to operate such options by exemption. These options are structured in a manner which permits schemes to offer differing contribution rates within an option based on choice of provider.

The Office of the Registrar continues to monitor efficiency-discounted options on a monthly basis to ensure that they comply with section 33 of the Medical Schemes Act with regards to membership and financial sustainability.

## Marketing material and application forms

During the period under review we continued to rigorously evaluate the marketing material of schemes in keeping with the high regard which we pay to the protection of beneficiaries, particularly with reference to larger schemes.

The marketing material and application forms of the following schemes were evaluated:

- Alliance Midmed
- Bankmed
- Bonitas Medical Fund
- Compcare
- Discovery Health
- Genesis
- Genhealth
- Grintek
- Ingwe Health Plan
- Keyhealth
- Liberty
- Medimed
- Medihelp
- Metropolitan

- Nampak
- NIMAS
- Pharos
- Polmed
- Spectramed Medical Scheme
- SABMAS
- Suremed
- Thebemed

During our analysis, we found the following discrepancies:

- schemes failing to indicate specific non-PMB chronic conditions covered under the various options;
- application forms failing to provide all the options available for applicants to choose from (this is concerning as it offends against the open enrolment provisions in the Act); and
- marketing material failing to clarify PMB entitlements, thereby not providing members with information consistent with PMB regulations.

Regarding schemes which operate programmes in contravention of the definition of doing the business of a medical scheme, as defined in the Act, the Office has ordered them to cease and desist from operating such programmes. Certain international travel, loyalty, and reward programmes are among the affected products.

In this financial year we further broadened our scope of monitoring scheme material by requiring all schemes to submit their information on an annual basis for our evaluation. We will continue to exercise ongoing regulatory oversight to monitor the marketing material and application forms of schemes to ensure their compliance with scheme rules and the Medical Schemes Act.

## Clinical Unit

Our Clinical Unit was restructured in the period under review to allow for greater interaction with the medical doctors within the CMS, thereby strengthening and supporting the core functions of the Unit.

The Unit continued to perform valuable work in key areas, including furnishing advice on PMB entitlements, hospitalisation, neonatal care, pre-authorisations, and the appropriateness of exclusions. The Clinical Unit provides crucial support to the work of the Complaints Adjudication Unit in addition to participating in the activities of our Consumer Education & Trustee Training Unit.

## Monitoring the financial soundness of schemes

Our Financial Supervision Unit (FSU) continued to ensure that medical schemes are financially sound, and intervened where necessary. FSU is also working to further improve the quality of data that schemes submit in their Annual Financial Statements (AFS) and statutory returns.

Over the past 10 years FSU has made significant progress in achieving standardisation and uniformity regarding proper disclosure and good financial reporting across the entire medical schemes industry. The Unit has also ensured that accounting and auditing standards are complied with.

The primary sources of financial information for the Unit are quarterly and annual statutory returns. The Unit publishes guidelines and Circulars to assist industry with the completion of statutory returns.

FSU released a Circular to address issues that were identified during its analysis of statutory returns. These included:

- in reports of Boards of Trustees: disclosures on the number of trustees and non-compliance matters;
- in audited financial statements: no adherence to the prescribed format;
- compliance requirements of the International Accounting Standard (IAS), International Financial Reporting Standards (IFRS), and SAICA Accounting Guide for 2009; and
- accuracy and completeness of statutory returns.

Concerns were raised with schemes on other matters as well:

- high non-healthcare expenditure;
- low or rapidly reducing solvency levels;
- high claims ratios; and
- failure to meet budgeted targets.

FSU provides baseline supervision for all schemes, with heightened supervision and monitoring for schemes facing challenges, particularly those with solvency below the minimum required statutory solvency level of 25.0%. In this regard, we continued to interact with schemes on their business plans and turn-around strategies.

## Assessing the financial performance of schemes

In 2009 the number of registered medical schemes decreased to 110 from 119 in 2008; there were 33 open schemes and 77 restricted schemes. There were 190 registered benefit options in open schemes in 2009 (including two that were deregistered during the year) compared to 200 options

in 2008; this represents a decrease of 5.0%. In restricted schemes, there were 161 options in 2009 (including one that was deregistered during the year) compared to 172 in 2008.

The number of principal members increased by 2.9% to 3 488 009 in 2009. The number of dependants rose by 2.1% to 4 580 496, indicating an increase of 2.5% in the total number of beneficiaries to just over 8 million (8 068 505).

### Gross Contribution Income

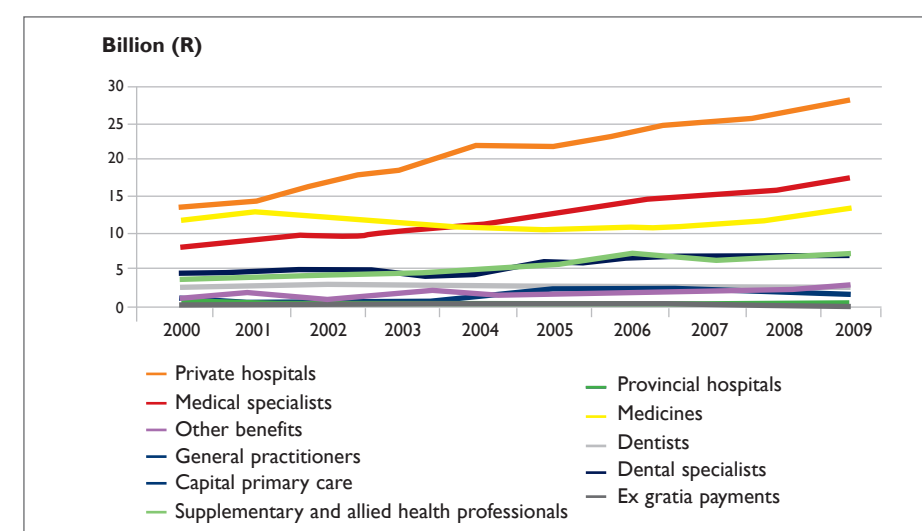
The Gross Contribution Income (GCI) for all medical schemes increased by 14.5% to R84.8 billion in 2009, from R74.1 billion in 2008.

### Healthcare expenditure

Scheme expenditure on healthcare benefits increased by 17.9% to R76.3 billion in 2009 from R64.7 billion in 2008. (Please refer to footnote 2 on page 174.) Hospitals accounted for R28.3 billion of the R76.3 billion paid to all healthcare providers. Expenditure on private hospitals increased by 18.1% to R28.0 billion compared with a 28.1% expenditure increase on provincial hospitals, to R288.9 million.

Expenditure on medicines dispensed by pharmacists and providers other than hospitals increased to R13.3 billion in 2009, which is an increase of 17.4%. Payments to specialists increased by 19.1% to R16.7 billion. Expenditure on general practitioners (GPs) increased by 8.4% to R5.7 billion while payments to dentists increased by 15.8% to R2.2 billion. Expenditure on dental specialists decreased by 9.7%; expenditure on supplementary and allied health professionals increased by 21.4% to R6.0 billion in 2009.

Figure 4: Healthcare benefits paid: 2009 prices\*



\* CPIX is the rebased Consumer Price Index (CPI) excluding interest rates on mortgage bonds. The values were adjusted for 2000-2009.

## Non-healthcare expenditure

Medical schemes spent R7.5 billion on administration in 2009 – a growth of 11.2% from R6.8 billion in 2008. Open schemes increased their administration expenditure by 8.7% from R5.1 billion to R5.6 billion. A 19.0% rise from R1.7 billion in 2008 to R2.0 billion in 2009 for restricted schemes resulted from a significant growth in membership numbers in the year under review, particularly in the Government Employees Medical Scheme (GEMS) which enrolled 39.2% more beneficiaries in 2009.

Managed healthcare management fees increased by 15.5% from R1.7 billion in 2008 to R2.0 billion in 2009. In 2009 the number of beneficiaries covered by managed care organisations grew by 2.4% to 7 955 248 (which is 98.6% of all beneficiaries).

Broker costs for medical schemes remained unchanged at R1.2 billion from the previous year while impaired receivables (previously known as bad debts) increased by 22.2% to R176.7 million for the year under review from R144.5 million in 2008.

Total non-healthcare expenditure (i.e. administration fees, fees for managed healthcare, broker fees, impairments, and commercial reinsurance) rose by 11.1% from R9.0 billion in 2008 to R10.8 billion in 2009.

The industry experienced a net healthcare deficit of R2.5 billion in 2009 (2008: R913 million), representing a substantial increase in losses incurred at operational level.

The inclusion of investment and other income resulted in schemes showing a net surplus of R2.4 billion in 2009. Net investment and other income decreased by 15.4% to R2.8 billion. This represents 290.3% of net surplus and underscores the importance of investment income for schemes which experience a difficult operating year.

Net assets or members' funds (total assets less total liabilities) rose by 4.8% to end the year at R29.4 billion. Reserves grew by 3.5% to R28.0 billion from the R27.0 billion recorded in 2008.

The industry average solvency ratio decreased by 10.1% to 32.9% compared with 36.6% in 2008. This was still above the prescribed level of 25.0%. The solvency ratio of open schemes was 27.4% (2008: 29.8%). Restricted schemes also experienced a decline in their solvency ratios, which reduced to 42.5% in 2009 from 49.8% in 2008. A number of open and restricted schemes suffered severe losses in 2009.

Figure 5: Industry solvency trends for all schemes

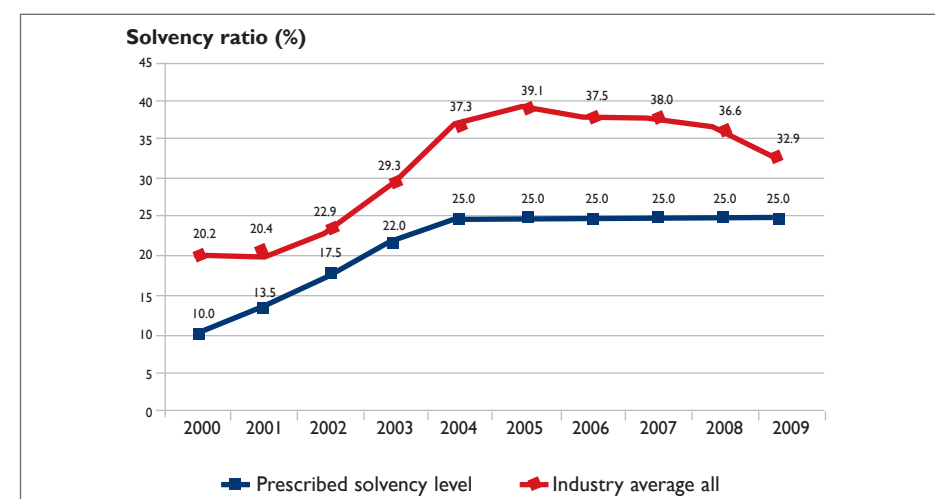


Figure 6: Industry solvency trends for open schemes

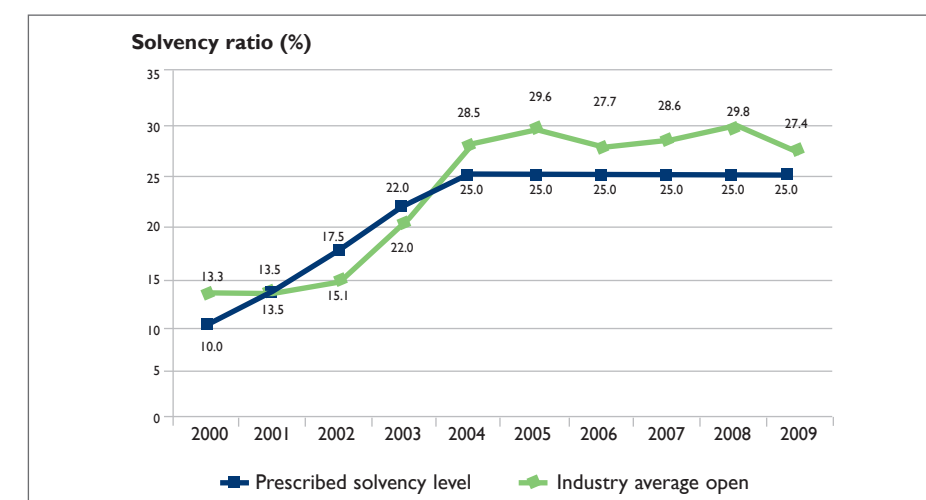


Figure 7: Industry solvency trends for restricted schemes

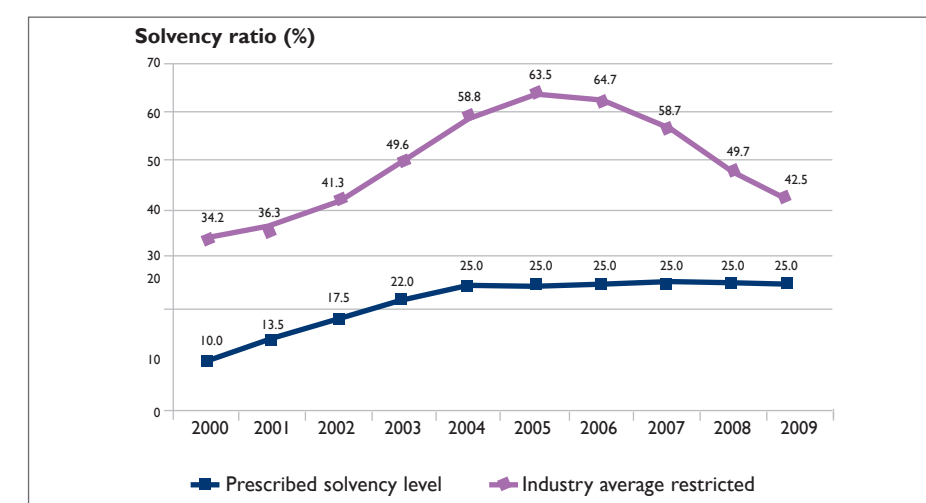






Table 2 depicts the financial highlights of all medical schemes over the last 10 years.

Table 2: Financial highlights of schemes: the last 10 years

Year	Prescribed solvency level (%)	Solvency of all schemes (%)	Total beneficiaries	Beneficiaries in schemes below solvency	GCI pabpa (2009 prices) R	Gross NHE pabpa (2009 prices) R	GAE pabpa (2009 prices) R
2000	10.0	20.2	6,729,540	3,224,080	7,832	1,056	500
2001	13.5	20.4	6,764,400	3,227,396	8,839	1,286	611
2002	17.5	22.9	6,714,134	3,770,379	9,407	1,285	678
2003	22.0	29.3	6,671,801	3,649,418	10,135	1,400	851
2004	25.0	37.3	6,662,563	2,614,433	10,715	1,483	899
2005	25.0	39.1	6,835,621	2,819,467	10,762	1,593	951
2006	25.0	37.9	7,127,343	3,363,751	10,550	1,523	1,022
2007	25.0	38.0	7,605,236	3,829,041	10,503	1,447	1,090
2008	25.0	36.6	7,874,826	2,058,427	10,294	1,352	1,078
2009	25.0	32.9	8,068,505	2,246,674	10,680	1,361	1,019

GCI = Gross Contribution Income  
NHE = Non-Healthcare Expenditure  
GAE = Gross Administration Expenditure  
pabpa = per average beneficiary per annum

## Monitoring compliance with regulation 29: solvency

A key regulatory obligation is ensuring that medical schemes are financially sound and able to maintain the minimum statutory solvency level of 25.0% as prescribed by the Medical Schemes Act. Schemes which fail to meet solvency requirements must submit business plans to the Office and, where necessary, appropriate action plans as well. We analyse and approve these actions plans if they are found to be satisfactory.

Furthermore, the Office closely monitors schemes which are above the required solvency of 25.0% but whose solvency is rapidly decreasing. Interventions on such schemes may include submission of management accounts, financial review meetings with the Boards, and submission of business plans to allow for the requisite monitoring. Other schemes kept under close watch are those with governance problems as well as those under curatorship.

We are currently monitoring 22 schemes (2008: 21) due to their solvency levels being below the statutory level of 25.0% as at 31 December 2009: 16 open (2008: 14) and 6 restricted (2008: 7) schemes.

The average solvency of open schemes under close monitoring was 15.2% in 2009 (2008: 17.1%). Three additional schemes were on close monitoring in the period under review, namely Protea Medical Aid, COMMED, and Gen-Health Medical Scheme; one scheme achieved the required solvency. Pathfinder Medical Scheme, which had negative reserves, was deregistered.

The average solvency level of restricted schemes under close monitoring was 11.2% in 2009 (2008: 13.7%). This was largely occasioned by a decrease in the solvency of about half of the restricted schemes under monitoring. GEMS continued to make progress towards achieving the required solvency level despite its ongoing growth in membership.

On 31 December 2009 only one scheme, Purehealth, had a solvency below 10.0%. The scheme applied for voluntary liquidation at the end of the year. As part of our regulatory interventions, and to ensure the protection of member interests, certain schemes with a worsening financial position were instructed to consider amalgamation. This highlights the trend in rising claims costs which continue to pose a challenge to schemes.

Eight schemes had solvency levels of 10.0-13.5% (including GEMS). A further six schemes had solvency levels of between 13.5% and 17.5%. Seven schemes reflected solvency of 17.5-22.0% while a further two were between 22.0% and 25.0% in terms of their solvency.

No new restricted schemes fell below the prescribed 25.0% solvency level during 2009. Impala Medical Plan attained a solvency in excess of 25.0% and was accordingly removed from close monitoring.

There was a decrease in the percentage of members belonging to open schemes which failed to meet the prescribed minimum solvency levels. In total, there were 4 815 334 (2008: 4 888 906) beneficiaries in the open scheme market as at 31 December 2009, of which 20.6% (2008: 22.0%) were on schemes not meeting the prescribed minimum solvency requirement. The restricted scheme market, however, showed an increase in members on schemes failing to meet the prescribed solvency levels. There were 3 253 171 (2008: 2 985 920) beneficiaries on restricted schemes as at 31 December 2009, of which 38.6% (2008: 32.9%) were on schemes not meeting the prescribed minimum solvency requirement.

In total, 27.8% (2008: 26.1%) of beneficiaries belonged to schemes on close monitoring as at 31 December 2009. This figure decreases to 13.6% if GEMS is excluded.

### Solvency per scheme

Built Environmental Professional Associations Medical Scheme (BEPMED) had a solvency of 10.1% in the period under review, a substantial improvement on its solvency of 3.3% in 2008. The scheme experienced high claims; this, coupled with a low membership level, continues to pose a threat to its sustainability. The scheme does, however, have reinsurance in place to mitigate against adverse claims fluctuations. BEPS is working with the Office in pursuing alternatives that would ensure these challenges are properly addressed.

Community Medical Aid Scheme (COMMED) fell below 25.0% solvency in 2009; it ended the year on 19.7%. Its average age and pensioner ratio are above the industry average. The scheme also experienced increase in membership and high non-healthcare costs. Together, these contributed to the dilution of its reserves. The scheme is under close monitoring and has submitted a business plan for review and consideration.

GEMS had a solvency level of 11.1% during 2009. This is a relatively new scheme in its fourth year

Registrar's review





of operation and still at the phase-in level of solvency; it has experienced phenomenal growth in its short period of existence. The scheme continues to monitor benefit design and to implement measures to reduce the impact of claims on reserves. It also provides the Office with monthly management accounts and quarterly financial updates for monitoring purposes.

Gen-Health Medical Scheme, still under curatorship, had a solvency of 21.5% in December 2009. The scheme, however, had a bad claims experience during the year under review, resulting in a significant loss of reserves; it was subjected to close monitoring.

Hosmed Medical Aid Scheme faced a number of governance challenges in 2009. The scheme ended the year with a solvency of 12.4%, requiring the submission of a business plan to the Office. The business plan was rejected after analysis; a revised plan was submitted for consideration. The scheme continues to be closely monitored and is required to submit monthly management accounts and attend quarterly meetings with the Office to discuss its performance against the agreed interim solvency levels.

Ingwe Health Plan had a solvency level of 12.0% at the end of 2009. The scheme submitted an exposition document regarding an amalgamation with another scheme for consideration.

Keyhealth showed a solvency of 14.7% in 2009. The scheme remained under pressure due to an ageing membership profile and high claims. It was placed under close monitoring and is required to submit management accounts. Regular meetings are held with the management of the scheme to monitor progress.

Liberty Health Medical Scheme had a solvency of 19.5% in 2009. The scheme amalgamated with Medicover Medical Scheme on 1 January 2010, with the merged entity reflecting a combined solvency level of more than the minimum statutory level of 25.0%.

Lonmin Medical Scheme had a 19.0% solvency in 2009; the scheme was registered in 2006 and should have attained a solvency ratio of 22.0% by now. The scheme has, however, experienced high healthcare expenditure, mainly due to an increase in referrals to outside parties. Managed care interventions and a clinical review committee were put in place to bring the situation under control. We approved the business plan submitted by the scheme. Lonmin is currently under monthly monitoring and we continue to meet regularly with the scheme.

The solvency of Minemed Medical Scheme was 11.5% at the end of the financial year. The scheme experienced deterioration in the quality of its risk pool as the proportion of active-to-pensioner members declined. This resulted in a significant net healthcare deficit, placing increased strain on reserves. We continue to interact with Minemed to remedy the situation.

Momentum Health had a solvency of 15.8% at its financial year-end. The scheme experienced worse-than-expected claims as well as an inadequate growth in membership. These factors have, inter alia, placed a strain on the solvency level of the scheme and we implemented close monitoring of the scheme by requiring the submission of monthly management accounts.

National Independent Medical Aid Society (NIMAS) had a solvency ratio of 13.0% in 2009.

NIMAS was instructed to seek an amalgamation partner; its demographic profile is worsening and the scheme is becoming unsustainable as a result. Membership growth has been relatively slow and has had a minimal impact on the average age of the scheme. NIMAS must continue to submit monthly management accounts to the Office and quarterly meetings are convened to discuss financial performance.

Oxygen had a solvency level of 11.2% in 2009. The scheme incurred losses due to changes in its demographic profile and the resultant higher claims experience in spite of attempts to address these. The situation was exacerbated by the loss of government employee members eligible for membership on GEMS. The scheme continued to submit monthly management accounts which are used to monitor progress in respect of financial performance. We continued to support the Board in finalising an amalgamation with another scheme. This should to a large extent address inherent problems confronting the scheme, with a view to ensuring that member interests are protected.

The solvency ratio of Pharos Medical Plan was 21.2% at the end of 2009. This was the year in which the scheme implemented new benefit designs together with a number of managed care interventions. Although its solvency has improved significantly, it remains slightly below the projected 23.4% level.

Protea Medical Aid Society had a solvency of 19.0% at the end of the period under review. The scheme fell below the statutory level of 25.0% during the course of 2009. Protea has restructured its benefits for 2010 in an attempt to reduce the losses incurred. It is also pursuing an amalgamation with another scheme.

Resolution Health Medical Scheme showed a solvency level of 16.0% for the period under review. Its non-healthcare expenditure, however, remained high; the Board introduced various initiatives to address this. We continue to monitor its position to ensure that these costs are reduced and maintained at acceptable levels.

Spectramed was 17.0% solvent at the end of 2009. We have approved the interventions it proposed, including redesigning of benefits to attract new members. The scheme is one of many faced with the threat of losing government employees eligible to join GEMS, potentially adversely altering the remaining risk pool. The scheme continues to be monitored closely.

Thebemed had a solvency of 14.3% at the end of its financial year. The scheme continued to struggle with membership in 2009 due to agreements not being finalised with potential employer groups. Reserve-building – i.e. keeping contributions affordable while building reserves in line with statutory requirements – has remained a challenge for the scheme. Thebemed has submitted an exposition document in respect of an amalgamation.

Umvuzo Health Medical Scheme failed to meet its budgetary targets, citing reasons such as unexpectedly high HIV claims, high PMB charges, and higher-than-expected claims ratios in certain periods. The scheme had a solvency of 14.5% in 2009. Umvuzo submitted a revised business plan for consideration by the Office.

# Licensing and accrediting administrators, managed care organisations, and brokers

## Administrators

On-site inspections were conducted in relation to compliance by administrators with the accreditation standards. We prepared reports and submitted detailed evaluations to the Executive Committee (EXCO) of the Council for accreditation.

We renewed the accreditation of the following administrators:

- Momentum Medical Scheme Administrators (Pty) Ltd
- Eternity Private Health Fund Administrators (Pty) Ltd
- V Med Administrators (Pty) Ltd
- Professional Medical Scheme Administrators (Pty) Ltd (PMSA)
- Discovery Health (Pty) Ltd
- Metropolitan Health (Pty) Ltd
- Metropolitan Health Corporate (Pty) Ltd
- Medscheme Holdings (Pty) Ltd

We also conducted on-site inspections of five self-administered medical schemes to assess their conduct and compliance with the accreditation standards for administration.

The following schemes were provided with certificates of compliance:

- Cape Medical Plan
- Platinum Health
- Impala Medical Plan
- Umvuzo Health

SAMWUMed was instructed to comply with a condition in order to obtain a compliance certificate. The following organisations complied with conditions which this Office had imposed on them:

- Sanlam Healthcare Management (Pty) Ltd
- Sigma Health Fund Managers (Pty) Ltd
- V Med Administrators (Pty) Ltd

Council refused to grant accreditation to Resolution Health (Pty) Ltd as an administrator and managed care organisation because the entity was found not fit and proper to render such services. Resolution responded by filing a notice of appeal and simultaneously applied to the High Court for interim relief seeking accreditation. The Gauteng North High Court subsequently ruled in favour of the CMS, finding that Resolution was indeed not fit and proper to continue rendering administration and managed healthcare services, and ordered that these be transferred to another entity or to the Resolution Health Medical Scheme within three months. The business was subsequently transferred to Agility Global Health Solutions Africa (Pty) Ltd.

## Managed care organisations

EXCO granted accreditation to a number of managed care organisations (MCOs) during the period under review.

Two new organisations were accredited to provide managed care services:

- DBC Risk Management Services (Pty) Ltd
- Lifechoice (Pty) Ltd

Renewal of accreditation as an MCO was granted to the following organisations:

- Allcare Administrators (Pty) Ltd
- Dental Risk Company (Pty) Ltd
- Intellicare (Pty) Ltd
- National Health Risk Managers (Pty) Ltd
- Clicks Direct Medicines (Pty) Ltd
- Enablemed (Pty) Ltd
- Medscheme Holdings (Pty) Ltd
- Private Health Administrators (a division of Sweidan Trust)
- Uno Healthcare (Pty) Ltd
- QA Care Plus (Pty) Ltd
- UDIPA Holdings (Pty) Ltd
- Sechaba Medical Solutions (Pty) Ltd
- Diagnostic Care (Pty) Ltd

The following organisations were deactivated on our website:

- Intellicare (Pty) Ltd
- Palms Court Medical Incorp
- Lifeworks (Pty) Ltd
- DentPro (Pty) Ltd
- Calibre Clinical Consultants
- Traumalink/Netcare 911 (Pty) Ltd
- Healthshare Health Solutions (Pty) Ltd
- Opticlear (Pty) Ltd
- Resolution Health (Pty) Ltd
- Calabash Health Solutions (Pty) Ltd
- Iso Leso Optics
- Preferred Provider Negotiators (Pty) Ltd
- Old Mutual Healthcare (Pty) Ltd

Registrar's  
review



Applications of the following entities were evaluated but not processed because they were found not to be providing bona fide managed care services and therefore did not require to be accredited:

- Ophthalmology Management Group Ltd
- Right to Care (Section 21)
- One Doctor (Pty) Ltd

The following MCOs complied with conditions imposed on them by the Office:

- Huntrex 5 (Pty) Ltd t/a RX Health
- Providence Healthcare Risk Managers (Pty) Ltd
- HIV Managed Care Solutions t/a Careworks (Pty) Ltd
- Old Mutual Healthcare (Pty) Ltd
- Medicross Healthcare Group (Pty) Ltd
- Onecare Health (Pty) Ltd
- Aganang HIV Resource Centre
- Medscheme Health Risk Solutions (Pty) Ltd
- Care Cross (Pty) Ltd
- Sechaba Health Solutions
- Mediscor PBM
- Independent Clinical Oncology Network (Pty) Ltd (ICON)
- Dental Risk Company (Pty) Ltd
- Allcare Administrators (Pty) Ltd
- South African Oncology Consortium (Pty) Ltd

Accreditation standards for managed care organisations

We revised the accreditation standards for managed healthcare delivery and published a draft document for comments. These comments were incorporated into the document for finalisation and implementation. The standards which will apply going forward incorporate an enhanced element of value proposition and place an obligation on MCOs to demonstrate the positive cost benefit of managed care interventions for medical schemes and their members in order to be granted accreditation.

Brokers

In the period under review our Accreditation Unit processed 310 new individual applications and 2 781 renewal applications. The Unit processed applications from 72 new broker organisations and 806 renewal applications.

A total of 25 broker-related complaints were investigated in 2009-2010 and either resolved or escalated to the Financial Advisory and Intermediary Services Act (FAIS) ombud who found that transgressions of the fit and proper requirements prescribed in FAIS had occurred.

Complaints related mainly to:

- medical schemes terminating membership due to non-disclosure of essential information;
- brokers providing improper advice; and
- unlawful collection and payment of professional fees to brokers.

The Office withdrew the accreditation of and refused to accredit the following broker organisations:

- Cherry Blossom Trading CC t/a Medical Aid Specialists
- Aquila Insurance and Healthcare Consultants (Pty) Ltd
- Ultimed Administrateurs (Edms) Bpk
- Injobo Health Solutions and Administration

At the end of March 2010 there were 7 519 healthcare brokers and 2 107 broker organisations accredited in South Africa.

Registrar's review





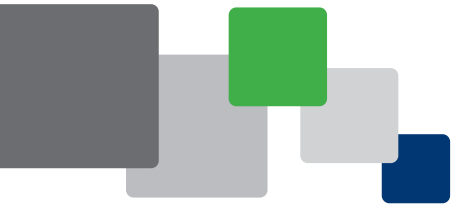
# support

Strategic  
objective

3

We provide support and guidance to trustees and promote understanding of the medical schemes environment among trustees, beneficiaries, and the public.





## Trustee training

During the period under review trustee training was conducted for a number of medical schemes, with presentations on the role of the trustee, the role of the Principal Officer, complaints, compliance, understanding financial statements, and an overview of the Medical Schemes Act. This training is aimed at creating heightened awareness among office bearers of medical schemes as to the environment within which they function and of the fiduciary responsibility which they are required to exercise on behalf of members.

Presentations on member rights and the prescribed minimum benefits (PMBs) were also conducted.

## Consumer education and awareness

Our Consumer Education & Trustee Training Unit participated in a number of initiatives directed at heightening consumer awareness about the existence and role of the CMS and of their rights with regard to medical schemes. Some 39 115 consumers were reached in the 2009-2010 financial year. We reached trade unions, consumer groups, HR departments, health organisations, and above all (over 75.0%) healthcare providers.

Interventions included CMS exhibitions staged at the Rand Easter Show in Johannesburg, the Royal Show in Pietermaritzburg, and the Pretoria Show. The annual Free State COSATU conference was also attended.

Participation in workshops and road shows took place as well. The Unit also met with Actuaries Without Frontiers (AWF) on their role in the development of consumer education material; the Unit subsequently entered into a cooperation agreement with AWF.

Several local and national radio stations invited the Unit to participate in discussions on various scheme-related topics. The radio stations enjoy a joint listenership of approximately 7.9 million listeners.

## CMS News, CMScript, and media relations

Our Communication Unit continued to provide support to the Office during the period under review in a number of areas.

Our previous Annual Report, covering the 2008-2009 financial year, was published early, with the Minister of Health being the first recipient thereof. Its official launch took the form of a press conference attended by media professionals and our management team; the event attracted unprecedented interest from our external stakeholders. It was also covered by a number of newspapers and featured on TV and radio news. The Annual Report was further

publicised at road shows in Durban, Cape Town, and Johannesburg where Principal Officers and trustees expressed appreciation for the opportunity to interact with us on a more personal level.

We continued to publish *CMS News*, the official voice of the CMS. The publication addresses priority issues of strategic importance to the CMS and industry. Although it reaches a diverse readership, it is aimed primarily at trustees. Three issues were published in the period under review, covering the following themes: unfair discrimination based on age and/or health status, the reasons why South Africans join medical schemes, and an overview of the relationships in the medical schemes industry. We conducted a survey on the reasons why people join medical schemes and appreciated the positive response which this initiative received.

Due to an ever-increasing demand for the publication, the print-run of *CMS News* was again increased and currently stands at 2 000 copies. An electronic version continues to be published on our website where it reaches a broader and more diverse audience.

The Unit continued to publish CMScript, our electronic newsletter dedicated to beneficiaries with PMB conditions. The staff newsletter *Masihambisane* was published every month.

We engaged with journalists on a regular basis during the period under review and organised press conferences, published press releases, attended to media enquires, and participated in TV and radio shows. We continued building and nurturing our relationships with the media fraternity.

Last but not least, we embarked on a project to clarify our Corporate Identity and revamp our website. We engaged both internal and external stakeholders by means of surveys asking for their views on our old logo and their preferences for a revised one. The response to this initiative has been very positive and the project will be finalised in the 2010-2011 financial year.



# enforcement

A referee in a yellow and black striped shirt is shown from the back, holding a yellow card high in the air with his right hand. The background is a clear blue sky. The word "enforcement" is written in large, light blue letters across the top of the image.

# 4

Strategic  
objective

We foster compliance with the Medical Schemes Act by medical schemes, administrators and brokers, and initiate enforcement action where required.





# Compliance with the Act

In 2009-2010 we continued to enforce the provisions of the Medical Schemes Act; a number of material violations were dealt with by our Compliance and Legal Services Units. Compliance with the statutory requirement that trustees, administrators, and managed care organisations be fit and proper came under close scrutiny during the period under review.

## Bonitas Medical Fund

We have had ongoing concerns over an extended period of time regarding poor governance of this medical scheme and the persistent failure by its Board to respond positively to issues of concern raised by the Office; the acting Registrar, in accordance with his powers under the Medical Schemes Act, applied to the High Court for an inspection into the affairs of the scheme. The inspector produced a comprehensive report where he detailed his findings and recommendations. A key finding was that the Board was not fit and proper to manage the affairs of the scheme; the inspector recommended that the CMS take urgent action.

The acting Registrar, with concurrence of Council, subsequently applied to the High Court for an order placing the scheme under curatorship. This application was opposed by the Board in spite of their undertaking to support the Office with whatever regulatory measures were indicated.

The administrator, Medscheme Holdings (Pty) Ltd, is also implicated in the findings of the inspection, and filed a belated application with the High Court to have the inspection report struck out.

As a result of pressure occasioned by the inspection, the Board instituted disciplinary proceedings against its Principal Officer, Bafana Nkosi; he tendered his resignation on the eve of the disciplinary hearing. A further consequence of the inspection was the institution of a claim by the Board against Medscheme for the recovery of certain monies owed to the scheme.

The allocation of a court date for the hearing of the matter is awaited.

## Hosmed Medical Scheme

Our Compliance Unit engaged with the scheme after becoming aware that four trustees had launched a legal challenge to the outcome of the trustee elections conducted as part of its 2008 AGM. Attempts by the Office to mediate failed and in February 2010 the High Court granted the four trustees the order which they sought and appointed them as new interim trustees of the scheme until 30 June 2010.

The Office raised concerns with the interim trustees regarding the following:

- the costs incurred by the scheme as a result of them setting up new offices;
- an increase (facilitated by them) in their trustee remuneration;
- a resolution taken by them that the scheme fund the legal expenses resulting from their court application;

- their failure to appoint new auditors following the resignation of KPMG as the previous auditors of the scheme;
- their failure to submit monthly management accounts on behalf of the scheme; and
- their submission of unaudited annual returns on behalf of the scheme.

The interim trustees failed to address these concerns and elected instead to approach the court to complain about the alleged conduct of certain officials of the Office of the Registrar.

The absence of proper governance, the marked deterioration in the solvency of the scheme, and the importance of ensuring that the interests of beneficiaries are protected resulted in the acting Registrar making an application to the High Court (with concurrence of Council) for an order placing the scheme under curatorship.

## The curatorship of Pro Sano Medical Scheme

The curator has concluded his mandate. We have assisted him in winding down the curatorship with a view to a new Board being elected by August 2010 to govern the scheme.

# Board Notice 73 of 2004

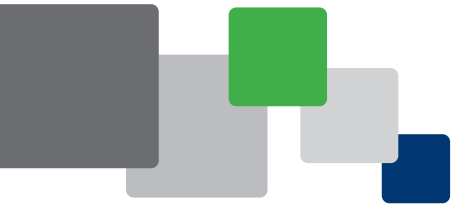
This Board Notice concerns our publication of an undesirable business practice declaration. It is directed at ensuring an objective, open, and transparent process where medical schemes change their administrators. Our Compliance Unit conducted enquiries into Resolution Health, Remedi, Spectramed, and Oxygen medical schemes and found them to have complied with the Board Notice.

# Top-up/gap cover

In the year under review we continued to closely monitor the industry for insurance products designed to do the business of a medical scheme. These products operate outside the scope and ambit of the Medical Schemes Act and do not offer the protection and entitlements which members of registered medical schemes enjoy. A proliferation of these products followed in the wake of the Supreme Court of Appeal (SCA) ruling in the Guardrisk case; urgent legislative reform to address the issue will be pursued in the coming financial year.

In a number of instances we found that certain medical schemes mislead members into believing that application for membership was dependent on them also purchasing certain gap-cover insurance products. We received and dealt with numerous complaints from members against these products.

Registrar's  
review



Some schemes introduced gap-cover products as part of their business. Spectramed medical scheme was directed to terminate its relationship with Turnberry and Selfmed was directed to terminate its relationship with Spectramed.

## Non-compliance with regulation 19

Medical scheme administrators whose services have been terminated are obliged to certify to the Office of the Registrar that a proper transfer of all medical scheme data has taken place to the new administrator.

Our Compliance Unit had to intervene where administrators failed to furnish the Office with the requisite certificate; we engaged with Old Mutual Healthcare (Pty) Ltd and ensured that compliance was effected.

## Non-compliance with regulation 10(6)

In the previous period we reported that Remedi Medical Aid Scheme had been engaged with regard to the scheme utilising member savings accounts to cover co-payments on certain PMBs due to these benefits being covered at scheme tariff and not at cost. The scheme was penalised and has commenced with reimbursing affected members.

## Section 43 enquiries

During the reporting period we continued to monitor the extent of non-healthcare expenditure by medical schemes. An enquiry was directed to Keyhealth concerning its decision to engage in a sponsorship of Tennis South Africa in the amount of R8 million. We found that the scheme had followed due process and that it had adhered to the principles of proper governance in taking the decision.

## Penalties

In 2009-2010 we imposed penalties on 10 schemes for the following contraventions:

- failure to comply with a directive issued by the Registrar – section 66(3);
- implementation of rules not approved by the Registrar – section 31(2);
- investment of assets in the business of a participating employer – section 35(8);
- failure to provide PMBs in full without co-payment or the use of deductibles – regulation 8(1);

- failure to submit Annual Financial Statements – section 37;
- failure to submit documents requested by the Registrar – section 42(1); and
- payment for PMBs from members' personal savings accounts – regulation 10(6).

## Exemptions

Council has the authority to grant schemes exemption from complying with certain provisions of the Medical Schemes Act where the applicants are able to demonstrate the existence of exceptional circumstances. We received 77 applications for exemption in the reporting period.

The majority of these concerned medical scheme investments and the extent to which these exceeded the parameters prescribed by Annexure B to the regulations; 65.0% of all applications were for exemption from the provisions of Annexure B read in conjunction with regulation 30 of the Medical Schemes Act and concerned category 4(b) which prohibits investment in foreign equity by medical schemes.

Medical schemes operating in the bargaining council sector applied for exemption from complying with the statutory obligation to provide the full package of PMBs due to their specific circumstances. These exemptions accounted for 12.0% of all applications received.

Applications for exemption from the following were also received:

- the requirement to hold a guarantee;
- the requirement to subject a proposed amalgamation to voting by members;
- certain requirements to register a low-income option; and
- the requirement to avoid investing in a participating employer.





15

Strategic  
objective

We investigate and  
resolve the complaints  
raised by beneficiaries  
and the public.

investigate



# Resolving complaints

Our Complaints Adjudication Unit received 4 488 complaints in the period under review. This is an increase of 1 350 complaints or 43.0% on the previous reporting period.

The Unit resolved 42.0% of complaints within 30 days; another 11.0% was resolved between 31 and 60 days. We managed to resolve another 7.0% in 61-90 days, bringing the total of complaints resolved in 90 days to 61.0%.

Unpaid accounts again constituted the majority of complaints received (30.9%). Limitation of benefits, PMBs, formularies, and designated service providers made up 25.4% of complaints received. Complaints related to the refusal of schemes to issue authorisation dropped slightly from 10.2% in 2008-2009 to 8.3% in 2009-2010; those related to the reversal of payments remained constant at 6.9%.

There was a marked increase in complaints related to non-payment of PMBs: from 9.3% as a percentage of total complaints in the last financial year to 25.4% in the current reporting period. This trend allowed the Office to respond accordingly and initiate a process whereby non-payment of PMBs was addressed through different interventions alluded to elsewhere in this publication.

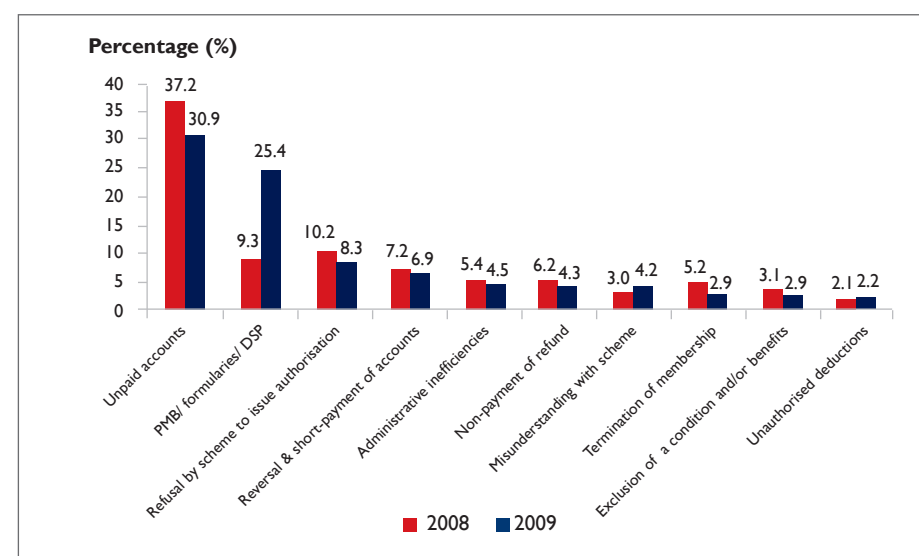
Table 3: Types of complaints received

Type of complaint	2008-2009	% of total	2009-2010	% of total
Unpaid accounts	1 166	37.2	1 386	30.9
PMB/formularies/DSP	291	9.3	1 138	25.4
Refusal by scheme to issue authorisation	320	10.2	373	8.3
Reversal & short-payment of accounts	225	7.2	311	6.9
Administrative inefficiencies	170	5.4	200	4.5
Non-payment of refund	193	6.2	194	4.3
Misunderstanding with scheme	132	4.2	134	3.0
Termination of membership	163	5.2	131	2.9
Exclusion of a condition and/or benefits	98	3.1	128	2.9
Unauthorised deductions	67	2.1	97	2.2
Imposition of waiting periods	64	2.0	79	1.8
Rejection of application	12	0.4	71	1.6
Suspension of membership	51	1.6	64	1.4
Late-joiner penalty	39	1.2	51	1.1
Withholding of benefit information	25	0.8	26	0.6
Restriction on change of option	24	0.8	25	0.6
Unethical marketing practices	17	0.5	20	0.4
Restriction on choice of provider	21	0.7	17	0.4
Contribution increases without proper notice	22	0.7	14	0.3
Problems with governance/management of scheme	13	0.4	14	0.3
Refusal to provide membership certificate	22	0.7	12	0.3
Member fraudulently assigned	3	0.1	3	0.1
<b>Total</b>	<b>3,138</b>	<b>100.0</b>	<b>4,488</b>	<b>100.0</b>

Table 4: Complaints resolution (%)

Category	Resolved within	2009-2010
M1	30 days	15
M2	60 days	28
M3	90 days	11
M4	120 days	7
M5	120+ days	19
Open		21
<b>Total</b>		<b>100</b>

Figure 8: Top 10 types of complaints

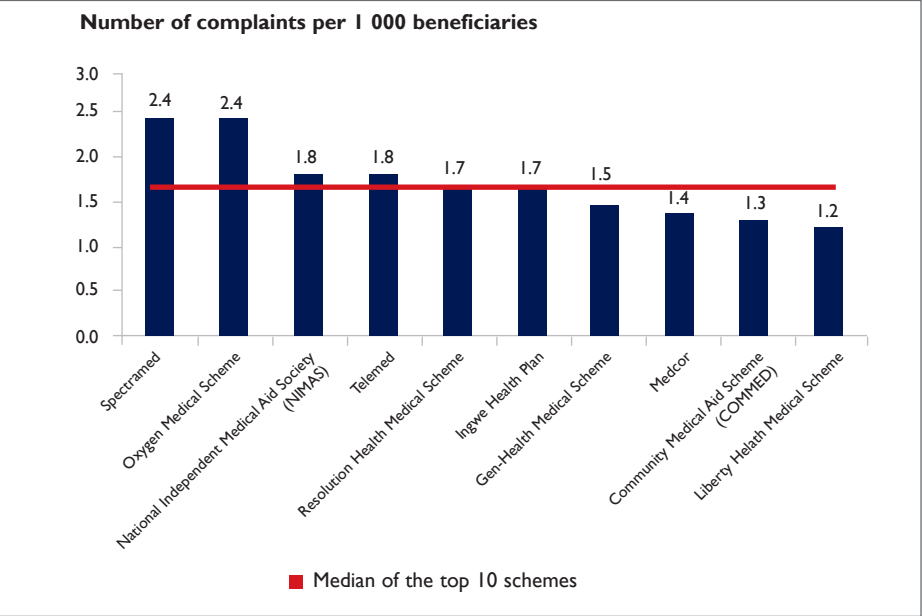


In 2009 we observed a significant increase in complaints pertaining to funding for conditions that fall within the prescribed minimum benefit or PMB regulations.

There was an increase of 291.1% in the number of such complaints between 2008 and 2009. Complaints relating to PMBs represented 25.4% of total complaints in 2009 compared with 9.3% for the previous year.

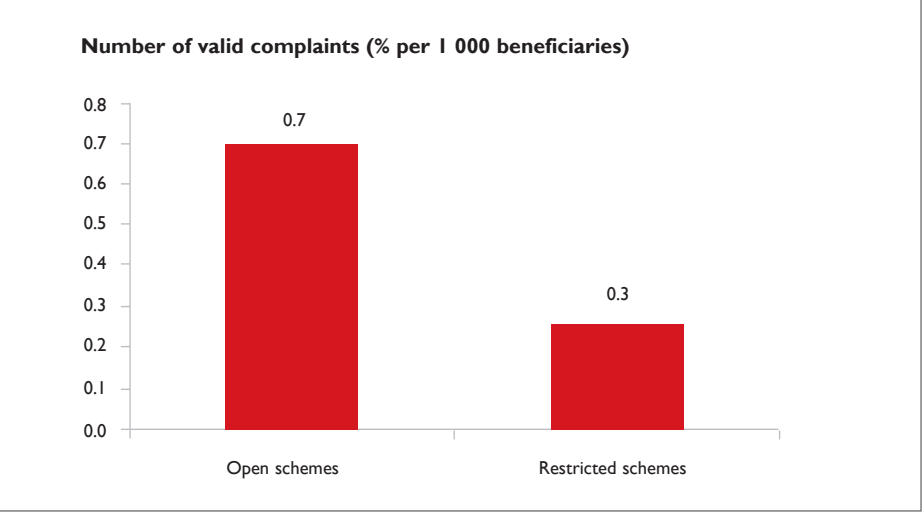
Complaints per 1 000 beneficiaries are shown in Figure 9. Complaints relating to the first four medical schemes are above the median. Please note that this classification does not necessarily mean that these schemes pose a bigger risk to members or that they are likely to fail; it simply shows that complaints relating to these schemes were more frequent compared to other schemes of similar size.

Figure 9:Top 10 schemes complained about



Fewer complaints were received from restricted medical schemes than from open medical schemes; see Figure 10.

Figure 10: Complaints by scheme type (% per 1 000 beneficiaries)



## Adjudicating appeals

Our Appeals Committee adjudicated on a number of disputes in the year under review. A summary of some of the topical determinations is presented below.

### B v Liberty Health Medical Scheme disputes committee, Liberty Health Medical Scheme, and BM

This appeal was brought against a ruling by the Liberty disputes committee in terms of rule 28 of the scheme; this rule replicates section 48 of the Medical Schemes Act. In terms of this section, a complainant should lodge an appeal within three months of the date on which the disputes committee had made its decision – unless s/he can show good cause for filing the appeal after the prescribed period. The 3-months period in this case had lapsed on 14 June 2007; the appeal was lodged with the CMS on 11 April 2008. The complainant, when applying for condonation of the late filing of the appeal, placed the blame on his legal representative's former assistant who, he says, was not aware of the period prescribed by the scheme rules and the Act. His case was premised on it not being of his own making.

The Appeals Committee found the explanation for the late filing of the appeal to be inadequate and cited various court judgments in support of its ruling that a party is bound by his election even if it is based on wrong legal advice and that he cannot hide behind the mistake of his legal representative. The condonation application was dismissed on the basis that the reasons furnished for the delay were inadequate and did not show good cause.

### G v Registrar and Liberty Health Medical Scheme

This was an appeal against a ruling by the Office of the Registrar where it was found that the scheme had correctly made a short-payment on an account.

The member had requested authorisation from the scheme for an elective dental procedure. The scheme granted the authorisation and confirmed that the entire procedure would be covered in full. The annual benefit was R6 300. The member had joined the scheme during the benefit year and as such was only entitled to pro-rated benefits.

When the account was presented for payment, the scheme paid only R2 100, leaving the balance for the member's account. A few weeks after the procedure had taken place, the member received written authorisation in the post with a disclaimer confirming that pro-rated benefits would apply when a member joined the scheme during the benefit year. This, however, had never been conveyed in the various telephone conversations the member had had with the scheme.

The appellant was of the view that the scheme was liable to fund the procedure in full because she had not been advised telephonically that pro-rated benefits were applicable and because she was told that the account would be paid in full.

Registrar's review



The evidence before the Appeals Committee – in the form of recorded telephone conversations which the member had had with the scheme – confirmed that five people had advised that the account would be paid in full. The issue before the committee accordingly was whether the member had been informed in clear and unambiguous terms that pro-rated benefits would be applicable, regardless of the fact that a later written confirmation had contained a disclaimer.

The committee found that, while it was correct that benefits were governed by scheme rules read with the benefits schedule, to the extent that the scheme had made a misrepresentation to its member about the extent of cover available, the scheme was prevented from seeking refuge in its rules. The committee was of the view that the scheme was not immune from liability when it had mislead its member into believing that a procedure would be covered in full when in fact this was not true; it ruled that the scheme make good on its representation and fund the account in full.

Emphasis was placed on the crucial importance of clear and unambiguous communication with members and that a scheme could not absolve itself from liability where its agents had made certain representations on the basis of which a member had relied to his/her detriment. Moreover, a scheme could not seek refuge in its rules where its agents had misrepresented the true position as regards the extent of cover to a member; otherwise schemes would be able to promote their products under false pretences with impunity, which would be unconscionable.

## T v Registrar and POLMED

This dispute was about restricted medical scheme POLMED refusing to accept an applicant who was a former employee of the scheme on the basis of the applicant failing to meet the criteria set out under the eligibility clause of the rules of the scheme. The applicant, a former member of POLMED, was medically boarded in 2000 and had terminated her membership voluntarily that same year. In 2009 she requested POLMED to allow her back into the scheme without having applied for employment in the South African Police Service (SAPS).

Both the Office of the Registrar and POLMED referred to a number of rules relating to the eligibility clause as a basis for excluding the appellant from membership, particularly rule 6.2.5 which stipulates that “[w]here a continuation member voluntarily terminates his membership from the scheme, he shall not be readmitted as a member unless he is newly employed as an employee by the employer. Provided that such a newly employed employee will qualify for benefits from the date of application in which case he will be regarded as a new member”.

In upholding the decision of the Office of the Registrar, the Appeals Committee found that the registered rules of the medical scheme were clear: only employees of SAPS are eligible for membership with POLMED. The appellant did not meet this requirement; she was therefore not eligible to be a continuation member. The Appeals Committee did, however, caution that each case be treated on its own merits.

## M v Discovery Health Medical Scheme

The member’s attorney lodged an appeal against the decision of the scheme’s disputes committee confirming that the scheme was correct in declining funding for medication called Tractocile™ which the member had used during her pregnancy. Despite the fact that treatment of pregnancy, and specifically care that requires hospitalisation, is included in the prescribed minimum benefit (PMB) regulations, the medicine in question is not available in the public sector. Because the condition is a PMB, the scheme was liable to fund all hospital and other related cost, but it could refuse to pay for Tractocile™ which amounted to R97 689.16.

The member had been 25 weeks pregnant when the drug was administered for the first time. She had used the drug continuously from week 26 to week 29 instead of the maximum 48 hours recommended by the manufacturer.

During the hearing of the disputes committee, the scheme cited medical literature and the manufacturer’s guidelines on the proper use of the drug in multiple pregnancies and administration of the drug at less than 26 weeks (such as in this case). Both the literature and the manufacturer’s guidelines state that “there is only limited clinical experience in the use of Tractocile™ in multiple pregnancies or the gestational age group between 24 and 27 weeks because of the small number of patients treated. The benefit of Tractocile™ in these subgroups is therefore uncertain”.

It was argued on behalf of the member that the drug had been administered by a qualified and registered gynaecologist, that it had had an immediate positive effect, that the 48-hour limitation is subject to the health professional’s discretion, that the drug had been previously funded in a similar case, and that the 25-week prescription must be condoned. The member’s attorney further argued that the member had never been furnished with the scheme’s protocol and registered rules informing her of the strictures within which the drug must be administered.

The Appeals Committee upheld the decision that the scheme was liable to fund all hospital and other related costs for pregnancy but was entitled to apply its rules and reject the payment for Tractocile™ itself.

## V v Medihelp

The subject of this dispute was the benefit for hip replacement.

The beneficiary’s hip had dislocated on three different occasions. Each time the treatment was reduction and relocation of the hip; the beneficiary was of the view that this made her condition an “emergency medical condition” and therefore a PMB. On the third occasion a specialist orthopaedic surgeon had opined that the only solution was to do a total hip replacement.

The position of the scheme was that a hip replacement procedure can only be funded if it qualifies as a PMB condition under code 178H. Joint replacement procedures only qualify for a PMB if the treatment complies with the protocols and algorithms set by the CMS.





According to these protocols a joint replacement will only be considered as a PMB in the case of a fracture. The scheme considered all the reports and documents relevant to this complaint and came to the view that this case did not meet the criteria for PMBs.

But the Appeals Committee ruled that the condition was a PMB condition. The dislocation of a limb bone was listed under code 902H and the proposed treatment was reduction or relocation. The scheme had provided this treatment. A hip replacement is treatment for a fractured hip; this condition is listed under code 178H.

The Appeals Committee held, however, that when regard is had to considerations of managed healthcare – which is central to funding of healthcare under the Act – it seems that treatment in the form of reduction and relocation of the hip every time it dislocates may not be cost-effective and efficient. This was the point that the specialist orthopaedic surgeon had made in recommending a total hip replacement even though the condition in question did not fall under code 178H. It also does not seem reasonable to put a 73-year-old woman through the pain and inconvenience of a relocation of the hip every time it dislocates. But this aspect was not explored before the Appeals Committee and it was unable to make a finding on it.

The committee directed the scheme to make further written submissions on the appropriateness, efficacy, efficiency, and cost-effectiveness of a reduction and relocation treatment instead of a hip replacement.

In its subsequent submission to the Appeals Committee, Medihelp said it maintained its previous decision not to pay full benefits for the surgery. This decision was, however, based solely on the rules of the scheme and not on any appropriateness, cost-effectiveness, or other managed care considerations.

The Appeals Committee stated that evidence flowing from clinical and financial risk assessment and managed care can only come from the scheme; it is a principle of law that if a party fails to transmit evidence or information that falls peculiarly within his/her knowledge, the inference that is least favourable to that party may be drawn from proven facts.

Medihelp had refused to provide additional information or even to embark on a clinical and financial risk assessment exercise. The Appeals Committee argued that only the results of such an exercise would have enabled it to decide whether or not the attitude of the scheme was reasonable. The committee came to the conclusion that the only avenue left was to draw an adverse inference that there exists no reasonable basis as regards appropriateness, efficacy, efficiency, and cost-effectiveness for preferring, for the third time, the reduction and relocation over total hip replacement in the circumstances of this case.

Medihelp was directed to fund the hip replacement therapy in full. Given that the Chief Executive and Principal Officer of the scheme had failed to provide the information required by the Appeals Committee, the committee opined it would be reasonable for the Board of the scheme to consider requiring the Chief Executive and Principal Officer to fund the treatment from their own pockets.

## Medshield v Registrar and L

The basis for this dispute was the imposition of a 12-month waiting period on pregnancy as well as the consequent refusal to fund the treatment associated with pregnancy.

The member had applied for membership, through a broker, on 23 April 2009; he included his wife as a dependant. The broker advised that she submit the application to the scheme on the same day.

Membership became effective from 1 May 2009.

On 18 June 2009 the broker informed the scheme that the member's wife had discovered that she was pregnant. The scheme imposed a 12-month condition-specific waiting period on her membership on the grounds of non-disclosure; the scheme claimed that the condition was a "pre-existing sickness condition" as defined in the Medical Schemes Act.

The scheme was informed that the member's wife had not been aware that she was pregnant when she had signed and submitted the application form; she was only three weeks pregnant at the time. The Registrar found that the onus was on the scheme to prove that the member's wife had been aware of her pregnancy but had nevertheless failed to disclose her condition in the application form. Upon the failure of the scheme to do so, a ruling was made directing the scheme to fund the treatment relating to the pregnancy.

Medshield appealed the decision of the Registrar. The Appeals Committee dismissed the appeal based on the fact that the scheme had failed to show that the member had been aware of the pregnancy while signing the application form. His failure to disclose that his wife was pregnant was considered to be beyond his control; the scheme could not furnish evidence for non-disclosure of pregnancy. The committee also indicated that a 12-month condition-specific waiting period can only be imposed in terms of section 29A(1) of the Act and not in respect of non-disclosure of a pre-existing condition.

The committee also made an important finding after the scheme had indicated that it had done the member a favour by not terminating his membership for non-disclosure of a pre-existing condition; the committee indicated that the scheme could not have been justified in acting as such as there was no such non-disclosure on the facts of this case.

## Improving the complaints database

In 2009-2010 we embarked on a project aimed at improving our existing complaints database. We intend moving towards a new system of classifying complaints in the forthcoming financial year. The new classification system will be used as a passive monitoring tool to diagnose any systemic problems which may exist in the medical schemes environment.



# choice

Strategic  
objective

We foster the continued development of the Council for Medical Schemes as an employer of choice.

6



## Human Resources

### Competency and role-based proficiency

Competency and role-based proficiencies were developed for each job category at the CMS in the period under review. The HR Unit facilitated executive leadership sessions for members of the management team.

### Managing performance

Our performance management system is designed to ensure that high performance is both encouraged and rewarded. Two formal performance reviews were conducted in 2009-2010. High-performing employees were rewarded through our performance management and incentives policy.

### Acquiring talent

The aim of our talent acquisition strategy is to identify and hire the best talent. During the period under review, talented personnel continued to be sourced in line with our recruitment processes and policies.

In this financial year we also undertook a capacity needs assessment with the result that eight new positions were identified and approved for appointment in 2010-2011.

### Remuneration policy

Council approved a remuneration policy on 29 May 2009. It was implemented with effect from 1 April 2009.

### Training and development

Staff members undertook various training programmes in 2009-2010. A Workplace Skills Plan and Annual Training Report was completed and submitted to the Health and Welfare Sector Education Training Authority (HWSETA) who gave us a mandatory grant of R174 306.56.

### Employment Equity

Although the CMS has a diverse workforce, the representation of Indians and Coloureds is still below the nationally defined representation for designated groups. The CMS will continue to earmark available opportunities to ensure equitable representation of all designated groups.

Table 5: The CMS profile as at 31 March 2010

Occupational level	Men					Women					Total
	A	C	I	W	Total	A	C	I	W	Total	
Top management	0	0	0	0	0	0	0	0	0	0	0
Senior management	2	0	0	5	7	2	0	0	0	2	9
Professionals	4	0	1	4	9	6	2	0	5	13	22
Skilled technical	10	1	1	2	14	15	2	3	6	26	40
Semi-skilled	1	0	0	0	1	5	1	0	0	6	7
<b>Total permanent</b>	<b>17</b>	<b>1</b>	<b>2</b>	<b>11</b>	<b>31</b>	<b>28</b>	<b>5</b>	<b>3</b>	<b>11</b>	<b>47</b>	<b>78</b>

### Wellness programmes

The HR Unit continued to promote wellness and health activities. It provided debt counseling sessions and short-term counseling to employees experiencing personal or work-related problems. It participated in the promotion of HIV/AIDS programmes.

### Conversion from contracts of employment to permanent employment

All employees, with the exception of Unit Heads and Senior Managers, were converted to permanent employment with effect from 1 February 2010.

### Incapacity and ill-health retirement

The Unit developed a policy on incapacity and ill-health retirement to regularise situations which may arise by providing guidance relating to the rights and obligations of both employee and employer.

### Acting allowance

An acting allowance policy was introduced to provide guidelines in instances where an employee is required to act for a prolonged period of time.

### Recognition of long service

It was recommended that we honour employees who have had a long service, and as such we introduced long-service awards. At 10-year intervals, an employee will receive a once-off payment equivalent to one month's salary. The policy will be reviewed from time to time.



**Retirement policy**

The development of this policy was informed by members of staff who are over the age of 65. The new policy is intended to define a retirement age for the CMS.

**Managing our financial resources**

The CMS continues to manage its finances in terms of the Public Finance Management Act (PFMA). The PFMA directs that financial management must be efficient, effective, economical, and transparent. In line with this imperative, the CMS put in place systems of internal controls, constituted the Audit & Risk Committee, and duly appointed internal auditors.

**Budget**

The CMS submitted its projections of income and expenditure for approval by the Minister of Health in March 2009. Approval was received in June 2009. Schemes were subsequently levied at R15.42 per member per annum to allow us to meet our operational objectives.

**Financial management**

Monthly management accounts were produced. They served at relevant structures, including the Audit & Risk Committee. To monitor spending against the budget, monthly variance meetings were held with Unit Heads and Managers. Cash flow was monitored through monthly cash flow projections; this was also used to monitor spending against budget.

**Annual Financial Statements**

Our Annual Financial Statements (AFS) were finalised in time to meet the statutory deadline of 31 May 2010. They were duly submitted to the Auditor-General and National Treasury and then subjected to an external audit by the Auditor-General.

The CMS is pleased to report that it has received an unqualified audit opinion once again.

**Supply chain management**

Monthly supply chain reports were prepared and submitted to National Treasury, as required. We awarded a tender in respect of Corporate Identity and website development to the amount of R496 411 to Black Magic Communications CC. This company is BEE compliant.

**Internal audits**

Our internal auditors, Sizwe Ntsaluba VSP, submitted their 3-year rolling plan together with an internal audit charter which was approved by the Audit & Risk Committee. They covered the following risk assessments: information technology, accreditation, performance information, and corporate governance.

**Risk management**

Risk management continues to be a key focus area. A risk register was developed and is monitored on a monthly basis. The implementation of this monitoring tool has contributed significantly to the CMS being satisfied that the identification and management of risks to the CMS is being adequately monitored.

**Performance information**

We produced a performance information report which was reviewed by the Auditor-General. The summary of the performance information is set out on pages 85 to 116.

**Information Systems & Knowledge Management**

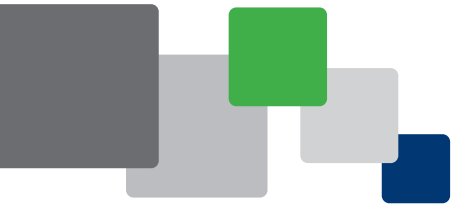
**Software development and reporting**

The IS & KM Unit rendered assistance directed at maintaining and facilitating the Risk Equalisation Fund (REF) shadow returns.

As part of our drive to align technology with our organisational needs and those of our stakeholders, we migrated some of our internal application systems to the latest Microsoft Office SharePoint platform. This interface allows staff members to access applications speedily and enhances collaboration across the enterprise.

Our new accreditation system was completed; it is our first fully functional major system running entirely on the Microsoft Office SharePoint platform. Other applications which we developed and deployed on the new platform include a Case Management System for our Customer Care Centre and a Document Centre which facilitates powerful searches and easy access to information within the CMS. This Document Centre is central to our Electronic Document Management Solution (EDMS).

Registrar's  
review



Further refinements were made to the CMS Master Database which stores information on all the stakeholders we serve, including medical schemes, administrators, managed care organisations, and healthcare brokers. Ongoing efforts are being made to update the system with the latest stakeholder information by actively communicating with our stakeholders.

**Network administration and IT Helpdesk**

Our Information Technology Helpdesk attended to 805 valid service requests. Training and IT induction programmes were undertaken in an ongoing effort to familiarise staff with the different technology platforms in use at the CMS.

Emphasis was placed on securing and upgrading our network.

**Knowledge and records management**

Our Resource Centre further expanded our library in the period under review to further enhance knowledge sharing within the organisation. We continued to serve and comply with our obligation in terms of Promotion of Access to Information Act (PAIA) legislation. Our section 32 report was submitted to the South Africa Human Rights Commission. Submissions in terms of the report required to be submitted in terms of section 15 of PAIA were also made to the Department of Justice and Constitutional Development. The report was published in *Government Gazette 32732*.

**Customer Care Centre**

Our Customer Care Centre handled 43 432 calls in the period under review. Our call handling time was 2 minutes and 55 seconds; the average queuing time was 1 minute and 56 seconds.

Registrar's  
review



# alliances

7

Strategic  
objective

We develop strategic  
alliances nationally,  
regionally, and  
internationally.





We interacted with the Competition Commission regarding an exemption application by New National Hospital Network. We were requested to furnish a view on the anticipated impact of this network on the medical schemes industry.

The Office participated in quarterly meetings with the FAIS Advisory Committee to the Minister of Finance. There was further interaction with the Financial Services Board (FSB) in relation to the exchange of regulatory information for purposes of licensing financial services providers and the accreditation of brokers.

## Looking to the future

Looking ahead, there are a number of critically important factors which will significantly determine the ability of schemes to continue serving the best interests of beneficiaries.

### Risk pooling

Risk pooling is critical to avoid a single-fund monopoly while limiting the fragmentation of risk pools occasioned by choice of scheme. Protecting risk pools entails careful consideration being given to issues such as the demographic profile of medical schemes, the implementation of the Risk Equalisation Fund, and the community rate paid by members of schemes.

### Governance

This concerns the management of medical schemes in accordance with accepted principles of good corporate governance as contained in the various versions of the King Reports. In achieving this objective medical schemes need to obtain access to appropriate skills.

### Transparency

In keeping with the requirements of the King Reports on corporate governance, there is a need for increased transparency in the way in which schemes engage with and advise their members.

### Income cross-subsidisation

There is a need to enable low-income participation in medical scheme membership.

## Conclusion

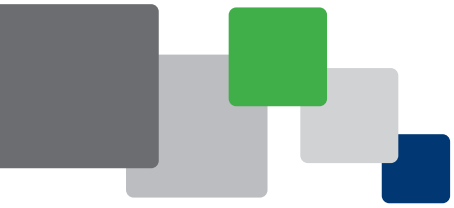
The year under review presented a significant range of challenges in a number of critical areas of the regulatory environment, but I am pleased to report that the Office acquitted itself admirably of its task.

My gratitude goes out to the management and staff of the Council for Medical Schemes for their commitment to the task at hand. Without their dedication and support we would not have been able to execute our regulatory mandate as effectively as we were able to. I would also like to express my appreciation to the Council for its ongoing support during a protracted period wherein the post of Registrar was vacant, and in particular to the Chairperson for his willingness to assist in a number of areas in which we were required to engage.

I believe we are well-positioned to further develop and build on the important goals achieved in regulating this very dynamic industry and I have no doubt that we will rise to the challenges posed by the next phase of our regulatory journey with distinction.

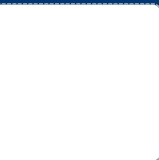
**Craig Burton-Durham**  
**Acting Registrar (up to May 2010)**  
**28 July 2010**

Registrar's  
review



A decade of **developing**





“That which is good is never finished.”

Sukuma tribal proverb  
Tanzania

## Strategic objective I

We monitor the impact of the Medical Schemes Act, research developments, and recommend policy options to improve the regulatory environment.

Key performance indicator	Target	Actual performance	Reason for deviation
Monitor the impact of the Medical Schemes Act and trends in private health finance			
Review of quarterly and annual statutory returns	Report to IT on additional indicators, for annual returns by October 2009	The report on additional particularly on non-financial data, was concluded in September 2009. We also amended the existing validation rules and collated validation rules on the new variables. The Research & Monitoring Unit edits were consolidated with the ones suggested by by Financial Supervision Unit on financial data and the final updated data specification was forwarded to IT	No deviation
Analysis of non-accounting data, including demographics, utilisation of healthcare services, burden of disease, and geographic distribution of membership for quarterly and annual statutory returns	Scheme submissions of annual reports by end August 2009	Data analysis on the “review of operations” section of the Annual Report was concluded on schedule as well as the required Annexure on non-financial data and benefits section	No deviation
Monitor changes to contributions and benefits within medical schemes			
Review contribution assessment guidelines	A Circular communicating recommendations of review process to stakeholders by August 2009	Participated in process to revise Appendix I for rule submissions; a Circular in this regard was published in July 2009	No deviation
Participate in the development of a framework for the assessment of scheme rules and the approval of contributions and benefits	Report outlining process for approval of scheme rules by June 2009, and as per Benefits Management Unit targets	A report was produced in September 2009	No deviation
Pricing the PMB package			
Provide costing support to the REF Unit for PMB pricing, identifying REF risk factors and constructing a weighting table	Input into the PMB pricing report to be produced by the REF Unit by February 2010	Input was given during RETAP meetings discussing the way forward on the costing	No deviation

Performance information: performance v targets





Strategic objective 1 (continued)

We monitor the impact of the Medical Schemes Act, research developments, and recommend policy options to improve the regulatory environment.

Key performance indicator	Target	Actual performance	Reason for deviation
Pricing the PMB package (continued)			
Participating in processes to specify data requests to medical schemes; participating in data cleaning exercise	A complete data collection tool by end of May 2009	Detailed data specification was completed and discussed within a sub-committee of RETAP; this aspect of the project was delayed by seven months	This aspect of the project was delayed due to problems that were discovered with the data that medical schemes collect on PMBs. Schemes adopt different approaches in coding for PMB conditions, and differences in administrator systems meant that data comparisons could not be done. The project has since been expanded and is being implemented in 2010-2011 with participation from a wider spectrum of medical schemes all responding to a standardised data collection tool
Assessing the coverage of non-PMB conditions and the impact on beneficiaries			
A systematic assessment of medical scheme trends on coverage of non-PMB conditions	A draft report detailing trends and the impact on members of the coverage of non-PMB conditions by end November 2009	Draft report was produced in December 2009 due to delays in procuring software for benefit comparisons	No deviation
Evaluating the impact on beneficiaries of excluded conditions in terms of OOP expenditure; results to feed into REF-driven PMB review process	A final report by end February 2010	The final report was produced on schedule	No deviation
Monitoring ICD-10 implementation			
Ongoing monitoring of compliance by medical schemes and other stakeholders by the National Task Team on ICD-10	Quarterly reports on level of compliance by medical schemes	The final report was produced on schedule	No deviation
Publicising the confidentiality document through workshops	Regular quarterly meetings of the National Task Team on ICD-10 Implementation	Continued to support the ICD-10 implementation process by collating the ICD-10 aggregated compliance statistics and produced quarterly reports	No deviation

Strategic objective 2

We secure an appropriate level of protection for beneficiaries of medical schemes and the public by authorising the conduct of medical schemes and monitoring their financial performance.

Key performance indicator	Target	Actual performance	Reason for deviation
Ensure compliance by all medical schemes in their rules with the Medical Schemes Act, amended regulations, and revised model rules			
Circulate to schemes the dates for submission of contribution and benefit changes; advise schemes that there will be no marketing of contributions or benefits prior to their approval and that transgressors will be penalised	Circular outlining revised process for submission of contribution and benefit changes by June 2009	Circular 19 was sent out on 17 July 2009	No deviation
Ensure submission by schemes of Appendix 1 and Annexes A and B on contribution and benefit changes by 1 October 2009	Appendix 1 and Annexes A and B received by 1 October 2009	95% received on or before 1 October 2009	Only schemes with amendments taking effect from 1 January 2010 must comply; 5% have mid-year changes
Review and approve contribution and benefit changes	Online submission of contribution on Appendix 1 and benefit schedules by 1 October 2009; recommendations to Registrar on annual contribution and benefit changes for each scheme	95% of benefit schedules were received on or before 1 October 2009 and recommended to the Registrar	The remaining 5% would be benefit schedules for schemes that applied for extension beyond the due date
	Publish list of approved open scheme options on website no later than second week in November 2009 and restricted scheme options in mid-December 2009	Circular 36 published on 19 November 2009 and Circular 39 published on 18 December 2009	No deviation
Engage in the assessment of contribution and benefit changes together with the Benefits Management Unit and Research & Monitoring Unit	Final decisions on the 2010 contribution and benefit changes by end December 2009	Completed within prescribed timeframes	No deviation
Monitor interim contribution and benefit changes	Applications within seven days of receipt with recommendations to Registrar within 10 days	Achieved target (130 changes monitored)	No deviation
Communicate reasons for not registering rules to schemes	Letter within seven days of analysis of rules	Achieved target (eight letters)	No deviation
Make available information on rejected/approved rules to internal staff	Publish information on intranet once Registrar has taken a decision	Circular 36 published on 19 November 2009 and Circular 39 published on 18 December 2009	No deviation

Performance information: performance v targets





Strategic objective 2 (continued)

We secure an appropriate level of protection for beneficiaries of medical schemes and the public by authorising the conduct of medical schemes and monitoring their financial performance.

Key performance indicator	Target	Actual performance	Reason for deviation
Ensure compliance by all medical schemes in their rules with the Medical Schemes Act, amended regulations, and revised model rules (continued)			
Interpret and guide stakeholders on model rules	Communicate with stakeholders, as required	Not applicable	Model rules to be reviewed in future
Analyse applications for registration of new schemes	Recommendation to Head within 14 days of receipt of application for registration of new scheme	Achieved target (three cases)	No deviation
Monitor conditions imposed on schemes during the rule amendment process; this includes monitoring in terms of section 33 and regulation 29(4) of the Act	Monthly review of scheme reports for compliance with conditions	Achieved target (75 reviews)	No deviation
Publish in the Government Gazette a notification of the registration of medical schemes	February of each year	Government Gazette published	No deviation
Maintenance and update of the Master Database	As and when required	Master Database up to date	No deviation
Send a Circular to schemes regarding contact and management details which have changed	Circular to be sent by end April 2009	Circular 9 of 2009 issued on 30 April 2009	No deviation
Manage amalgamations in compliance with the approved exposition and prevailing legislation	Prepare a report based on amalgamation documents within 21 days	Achieved target (20 documents)	No deviation
Manage liquidation procedures in compliance with the approved exposition and prevailing legislation	Prepare a report based on exposition document within 14 days	Achieved target (three reports)	No deviation
Analysis of business plans where schemes change administration and managed care entities	Schemes to submit business plans as and when the move is anticipated to determine the impact on health and non-health expenditure as a result of the move; recommendations to Head within seven days of receipt	Project abandoned	Not feasible; more research needs to be done to determine the need for such a requirement
Send Circular to schemes regarding submission of business plans when changing administrators	Circular to be sent by end April 2009	Project abandoned	Not feasible; more research needs to be done to determine the need for such a requirement
Participation in the finalisation of the review of model rules	Internal workshop of the revised model rules as and when required	No workshops were held	No deviation

Strategic objective 2 (continued)

We secure an appropriate level of protection for beneficiaries of medical schemes and the public by authorising the conduct of medical schemes and monitoring their financial performance.

Key performance indicator	Target	Actual performance	Reason for deviation
Ensure compliance by all medical schemes in their rules with the Medical Schemes Act, amended regulations, and revised model rules (continued)			
Render appropriate clinical advice and support to analysts responsible for rules	Advice provided on rules within one week of request	Achieved target (advice on five medical schemes)	No deviation
Alert Benefits Management Unit to relevant decisions having an impact on registration of rules	Advise BMU of decisions within one week of ruling becoming available	Achieved target (three rulings were provided)	No deviation
Analyse and improve statutory returns as tools for monitoring and reporting			
Development of quarterly returns	2009 quarterly IT development starts in March 2009, finalised by July 2009	Target not achieved; 2009 quarterly return not rolled out	CMS used the classic Software Development Lifecycle (SDLC) and developed a new system on the Microsoft Excel foundation. At final User Acceptance Testing (UAT) phase, it materialised that the system could not be shared amongst various users as had been originally expected. A solution could not be found and the system had to be terminated at a very late stage in the development cycle. This did not leave adequate time to bring the old system back online and no quarterly returns could be disseminated to stakeholders
Disseminate 2009 online quarterly statutory returns	Quarterly return available for completion by July 2009		
	Develop new online annual returns for 2009-2010	Achieved; online annual return system modified as per Financial Supervision Unit and SAICA requirements and rolled out successfully to our stakeholders on deadlines stipulated	No deviation; due to technical challenges regarding rollout of the new quarterly return system, it was decided to roll out the annual returns using the old platform
Liaise with relevant parties to determine scoping requirements	September 2009		
Investigate and develop new	October 2009		
Develop new GUI	December 2009		
Testing and implementation	February 2009	2009 return not rolled out (Quarter 1 and Quarter 2); Quarter 3 and Quarter 4 were published	Due to the quarterly return system for 2009 not being rolled out, we could not publish quarterly reports; we subsequently requested schemes to report quarterly performance via management accounts
Analysis of 2009 quarterly returns	Publication of reports: Q1 – beginning of October 2009; Q2 – beginning of October 2009; Q3 – end of February 2010		

Performance information: performance v targets

Strategic objective 2 (continued)

We secure an appropriate level of protection for beneficiaries of medical schemes and the public by authorising the conduct of medical schemes and monitoring their financial performance.

Key performance indicator	Target	Actual performance	Reason for deviation
Analyse and improve statutory returns as tools for monitoring and reporting (continued)			
Analysis of 2008 annual returns	Financial analyses of the annual return by end June 2009	Completed within prescribed timeframes	No deviation
Identify schemes which do not comply with regulation 29 on solvency using the returns	Quarterly reports of non-compliant schemes	Target not achieved; 2009 return not rolled out	Quarterly returns for 2009 did not roll out
Identify schemes which comply with regulation 29 on solvency but are experiencing rapid decreases using the returns	Quarterly reports on schemes experiencing rapid solvency decreases	Completed within prescribed timeframes	No deviation; although the returns were not rolled out, schemes were monitored based on 2008 audited solvency levels and management accounts
Examine and evaluate the structure and elements of regulation 29(4) business plans to assess the true financial position and performance of medical schemes	Report on scheme's action plan six weeks after receipt of the complete business plan	Completed within prescribed timeframes	No deviation
Monitor schemes' compliance with the agreed action plan	Quarterly report on extent of compliance with agreed action plan timeframes	Completed within prescribed	No deviation
Research the impact of unrealised gains/reserves on solvency	Final research paper by March 2010	Completed within prescribed timeframes	No deviation

Strategic objective 3

We provide support and guidance to trustees and promote understanding of the medical schemes environment among trustees, beneficiaries, and the public.

Key performance indicator	Target	Actual performance	Reason for deviation
Trustee training Promote understanding of the Medical Schemes Act by Boards of Trustees			
Analyse non-compliance reports submitted by various Units; rate the level of compliance for schemes, brokers, administrators, and managed care organisations	A compliance profile report for medical schemes, brokers, administrators, and managed care organisations	Not performed	Developing a compliance profile depended on the roll out of the Risk Assessment Framework by the Office, which is yet to be completed
In-house training and involvement of external experts on providing training as per training needs analysis of scheme (red schemes)	Provide trustee training as per schemes' requirements	GEMS: Introduction to Trusteeship on 30 October 2009; Minemed: Introduction to Trusteeship on 5 June 2009; SAMWUMed: 16 September 2009 (on governance, complaints, and compliance)	Trustee training was performed on a limited scale as the Risk Assessment Framework is yet to be finalised
	Provide training support on a quarterly basis	None	This depended on the finalisation of the Risk Assessment Framework
Identification of contracted service providers and establishing relationships with accredited training of service providers for orange and green schemes	Develop Memorandum of Understanding	None	This depended on the finalisation of the Risk Assessment Framework
Development of a trustee training manual, TIP, and training guide	Updated trustee training manual, the Trustee Induction Pack (TIP), and the training guide in line with the Amendment Bill	Achieved target	Finalisation was done in January 2010
	Online training manual	None	Various Units' input on manual not received timeously
Coordinate training requirements of Units	Training of administrators, schemes, and auditors on preparation of returns	None	Based on an internal needs assessment, it was found that the workshops were not necessary due to only minor changes implemented in the 2009-2010 online statutory return system
	Two sessions per year (Cape Town and Gauteng)	Conducted three Introduction to Trusteeship training: Johannesburg 19-20 November 2009; Cape Town 18-19 February 2010; Durban 18-19 March 2010	No deviation

Performance information: performance v targets

Strategic objective 3 (continued)

We provide support and guidance to trustees and promote understanding of the medical schemes environment among trustees, beneficiaries, and the public.

Key performance indicator	Target	Actual performance	Reason for deviation
Provide accurate information to stakeholders			
Participate in the training of Boards of Trustees and consumer groups; four trustee training sessions; eight consumer education workshops; radio talk shows	As per the Unit targets and on request by the Compliance unit and the public	Participated in training of the Board of Trustees:Western Cape (Cape Town), KwaZulu-Natal (Durban), Gauteng (Midrand); November 2009: special training to the Board of SAMWUMed; January 2010: SpesNet presentation on application and interpretation of provisions of the Medical Schemes Act; February 2010: National Department of Health training in Gauteng and the Western Cape; February 2010: radio interview by Radio KC based in Paarl; March 2010: National Department of Health training in the Northern Cape (Upington), Bloemfontein	No deviation
Use various tools to convey key messages to stakeholders, based on the priorities list			
Publish Annual Report 2008-2009	Annual Report published by 1 September 2009 and tabled before the National Assembly by the Minister of Health on 30 September 2009	Achieved target	No deviation
Address key issues in CMS News	CMS News to be published quarterly: June, September, December 2009, and March 2010	Published three issues in 2009-2010	Unavailability of resources
Prepare Circulars, editorials, opinion pieces and press releases on key issues	Circulars, editorials, opinion pieces, and press releases at least once a month	Achieved target	No deviation
Consumer education			
Provide training on Consumer Open Days to consumer groups, trade unions (federations), HR practitioners and EAPs (IPM and Chamber of Commerce), health organisations, healthcare providers (IPAs and specialist groups)	Two "Train the Trainer" education sessions per group annually in major centres	Achieved workshops: Trade unions – 8 Health organisations – 1 Consumer groups – 26 Healthcare providers – 12	No deviation
Outreach and awareness	Participate in consumer-focused programmes (Soweto TV, Speak Out on SABC 2)	Participated on 3 Talk (SABC 3) and Weekend Live (SABC 2)	No deviation

Strategic objective 3 (continued)

We provide support and guidance to trustees and promote understanding of the medical schemes environment among trustees, beneficiaries, and the public.

Key performance indicator	Target	Actual performance	Reason for deviation
Consumer education (continued)			
	Participate in selected target-specific outside radio broadcasts	Participated in radio broadcasts in Upington, Mpumalanga, and East London	No deviation
Outreach and awareness (continued)	Use media (radio slots) to inform of new trends and to educate the public	Coordinated radio slots with consumer affairs provinces; publicised consumer awareness articles in the following: Consumer Fair, Comutasa, The Commuter, Destiny Magazine, and FinWeek	No deviation
	Coordinate exhibitions (Johannesburg Easter Festival, Royal Show, Pretoria Show)	Johannesburg Easter Festival 3-13 April 2009; Royal Show 22-31 May 2009; Pretoria Show 27 August – 6 September 2009	No deviation
	Coordinate and support provincial activities during Consumer Month (March)	Consumer Month awareness campaign (KZN) 7 March 2010; Bloemfontein Consumer Month awareness campaign 11 March 2010; Durban Consumer Month awareness campaign 14-15 March 2010; Upington Consumer Month awareness campaign 15 March 2010	No deviation
	Celebration of World International Consumer Rights Day – 15 March	Attended three Consumer Day celebrations (Upington, Durban, Bloemfontein)	No deviation
	Coordinate in-house Consumer Day activities	None	Budgetary constraints
Liaising with internal stakeholders (e.g. Complaints Adjudication Unit, Customer Care Centre, Benefits Management Unit)	To establish trends that infringe on consumer rights (consumer alerts)	Two meetings, with Complaints Adjudication Unit and Customer Care Centre	No deviation
Liaising with external stakeholders (e.g. NCF, regulators, provincial consumer affairs offices)	Joint national campaigns	Participated in the following awareness campaigns: SASI (South African Savings Institute) on 21-24 July 2009;Western Cape on 3 & 15 December 2009; Northern Cape on 7 & 10 December 2009; North West on 9-10 December 2009; Gauteng on 15-17 & 19 December 2009	No deviation

Performance information: performance v targets



## Strategic objective 3 (continued)

We provide support and guidance to trustees and promote understanding of the medical schemes environment among trustees, beneficiaries, and the public.

Key performance indicator	Target	Actual performance	Reason for deviation
Consumer education (continued)			
Liaising with external stakeholders (e.g. NCF, regulators, provincial consumer affairs offices) (continued)	Participate in Consumer Protection Forum and National Consumer Education Committee activities	Consumer Protection Forum meetings attended: July and November 2009, March 2010; National Consumer Education Committee meetings attended: June & October 2009, January 2010	No deviation
Formalising relationships with key stakeholders (e.g. regulators and Actuaries Without Frontiers)	Develop Memorandum of Understanding	Completed and signed with Actuaries Without Frontiers	No deviation

## Strategic objective 4

We foster compliance with the Medical Schemes Act by medical schemes, administrators and brokers, and initiate enforcement action where required.

Key performance indicator	Target	Actual performance	Reason for deviation
Accreditation of administrators			
Liaise with and provide training to administrators and schemes regarding standards, administration requirements, and accreditation procedures in terms of the Act	Conduct an industry workshop in collaboration with the Financial Supervision Unit by March 2010	Not achieved	No workshop held with administrators as two meetings were held with audit profession regarding accreditation findings and problem areas experienced in evaluation of administrators
Manage the accreditation of new entities and prepare reports	Application assessed within two months of all relevant information received; evaluation report prepared, considered by the steering committee and finalised for submission to the Council EXCO within three months after evaluation	No new applications received	No deviation
Manage the renewal of administrator accreditation process taking into account contract reviews, assessment of financial soundness, and on-site evaluations (where appropriate)	Report prepared within three months of receiving all relevant information or on conclusion of further analysis in the event of an on-site evaluation, as may be required	No applications received	No deviation
	Five renewal evaluations completed and findings reports prepared by June 2009 and six by September 2009	Six administrators were renewed	No deviation
Ensure accreditation of brokers in terms of the Medical Schemes Act			
Review and process applications for accreditation of brokers and broker organisations	80% of new applicants accredited or accreditation renewed within 14 days of receipt of all relevant information	Processed 310 new individual applications, 72 new organisations, 2 781 individual renewal applications, and 806 organisation renewal applications	No deviation
Verify license status of applicants in terms of FAIS with the Financial Services Board	100% accredited within 30 days of receipt of all relevant information		
Maintain database for broker accreditation	Complete records are maintained	Ongoing	No deviation
Send renewal notification to brokers before expiry of accreditation	Notification sent at least 120 days before expiry of accreditation	1 479 individual renewal notifications were sent by SMS; 665 broker organisation renewal notifications were sent by post	No deviation

Performance information: performance v targets

Strategic objective 4 (continued)

We foster compliance with the Medical Schemes Act by medical schemes, administrators and brokers, and initiate enforcement action where required.

Key performance indicator	Target	Actual performance	Reason for deviation
Effect accreditation of managed care organisations			
Perform accreditation evaluations of new entities and prepare findings reports	Reports prepared within two months of receipt of all relevant information	Performed as per target	No deviation
Manage the renewal of accreditation of previously accredited entities by means of desk-based analysis, contract reviews, and assessment of financial soundness	10 evaluations completed and findings reports prepared by June 2009; 18 by September 2009; 23 by December 2009; 31 by March 2010	The target of 31 evaluations was achieved as 33 evaluations were done as follows: 15 renewal evaluations were completed; three new organisations were accredited; three new applications were turned down for not providing bona fide managed care services; 12 entities were deactivated on our website for various reasons	Two additional evaluations were performed
Participate in meetings of EXCO to consider applications	Reports for meetings two weeks in advance	Performed as per target	No deviation
Monitor compliance with conditions imposed and make recommendations about continued accreditation status	Recommendations to Registrar within 10 days of conditions coming due and status reports in September 2009 and February 2010	Recommendations were made to the Registrar within 10 days and status reports were also submitted to the Registrar, as per set target	Status reports were presented at SMMs on a monthly basis
Evaluate compliance by self-administered medical schemes with administration standards			
Conduct on-site evaluations of six self-administered medical schemes to evaluate compliance of their resources, systems, skills, and capacity with the relevant administration standards	One evaluation completed and findings report prepared by June 2009; four by September 2009; five by December 2009; six by March 2010	Five evaluations were completed that represented a 100% population as one medical scheme ceased to be self-administered	Medicover was deactivated on our website as it is now administered by V Med
	Evaluation reports prepared, considered by the steering committee and finalised for submission to the Council within three months after evaluation	Evaluation reports were prepared and considered by the steering committee and were presented to Council within three months after evaluation	No deviation
Participate in meetings of EXCO to consider evaluations	Reports for meetings two weeks in advance		
Ensure compliance with the financial aspects of the Medical Schemes Act			
Analysis of the following applications: auditors' approval; reinsurance contracts; exemptions; new schemes; amalgamations	Approval of auditors by end August 2009	Completed within prescribed timeframes	No deviation
	Reinsurance contracts: reply to schemes within 30 days of receipt of application; report within four weeks of receipt of all information	Completed within prescribed timeframes	No deviation

Strategic objective 4 (continued)

We foster compliance with the Medical Schemes Act by medical schemes, administrators and brokers, and initiate enforcement action where required.

Key performance indicator	Target	Actual performance	Reason for deviation
Ensure compliance with the financial aspects of the Medical Schemes Act (continued)			
Analysis of the following applications: auditors' approval; reinsurance contracts; exemptions; new schemes; amalgamations	Reports within four weeks of receipt of all information on exemptions, new schemes, amalgamations	Completed within prescribed timeframes	No deviation
Identify schemes that are non-compliant in respect of investments, i.e. Annexure B read in conjunction with regulation 30	Report on investments eight weeks after submission of annual returns	Completed within prescribed timeframes	No deviation
Identify schemes which do not comply with the Act and regulations in respect of financial aspects other than investments and regulation 29 using the returns and supporting documents	Report on other financial matters eight weeks after submission of annual returns	Completed within prescribed timeframes	No deviation
Identify schemes which do not comply with regulation 29 on solvency using the returns	Annual report of non-compliant schemes	Completed within prescribed timeframes	No deviation
Update the internal investments manual as new products and data become available	Updated manual by March 2010	Completed within prescribed timeframes	No deviation
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)	One governance inspection per quarter; reports in June, September, December 2009, and March 2010	Not performed as per target	Bonitas and COMMED inspections took longer to complete than anticipated
	Prosecution of non-compliance	Performed as per target	No deviation
Ensure schemes comply with identified priorities: non-healthcare expenditure			
Ensure schemes comply with identified priorities: non-health expenditure	One inspection per quarter; reports in June, September, December 2009, and March 2010	Not performed as per target	Bonitas and COMMED inspections took longer to complete than anticipated
	Charges laid within two weeks of decision	Not performed as per target	There were no instances where decisions had to be taken with regard to laying of charges

Performance information: performance v targets

## Strategic objective 4 (continued)

We foster compliance with the Medical Schemes Act by medical schemes, administrators and brokers, and initiate enforcement action where required.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Full inspection of non-compliant schemes</b>			
Inspections triggered by auditor interviews, market intelligence, financial or governance concerns	Initiate inspection within 10 days of concerns being raised	Performed as per target	No deviation
	Inspection report within 6-8 weeks	Performed as per target	No deviation
<b>Investigation of non-compliance</b>			
Investigations triggered by requests from other Units, information received, market intelligence, or any other source	Initiate investigation within 10 days of complaint being received and captured onto the case management system	Performed as per target	No deviation
<b>Initiate criminal investigations</b>			
Identify criminal charges; prepare statements and documents regarding criminal charges	Assist prosecuting authorities with investigation and prosecution of criminal cases; monitor progress	Performed as per target	No deviation
<b>Ensure compliance with provisions of the Medical Schemes Act and regulations</b>			
Follow up and monitor non-compliance by schemes recorded in quarterly reports (outstanding matters only); continuous monitoring of the impact of regulatory interventions	Quarterly, within one month of receiving report; finalisation of matters within six weeks of initiation	Performed as per target	No deviation
	Report on the impact, or lack thereof, of the regulatory framework on the medical schemes environment	Performed as per target	No deviation

## Strategic objective 5

We investigate and resolve complaints raised by beneficiaries and the public.

Key performance indicator	Target	Actual performance	Reason for deviation
Improvement of the Complaints Database			
Retrospective data mining/analysis of existing complaints; analysis of trends and identification of gaps in the existing database	A report on the state of existing complaints database by August 2009	A report outlining the state of existing complaints database was concluded by September 2009	No deviation
Assisting the Complaints Adjudication Unit in formulating a revised complaints classification system	Identify and classify variables for consideration in the new complaints data specification by October 2009	Additional work relating to rolling out the data specifications and classifications in the form of an IT specification has been done and a workshop with key internal stakeholders was held in March 2010; this work has now been concluded	No deviation
Determination of jurisdiction in respect of complaints raised by beneficiaries			
Determine whether the matter falls within the jurisdiction of the Council for Medical Schemes	Correspondence acknowledging receipt sent to complainant within two days where the matter falls within the jurisdiction of the CMS	Standard not met at all times	There was a time when the Telkom lines were not functioning and the Complaints Adjudication Unit could not receive or send complaints to stakeholders for a period of approximately seven days; as a result there was a backlog. Once the lines were functioning there was a flood of correspondence which stressed our capacity. The problem filtered through all activities that relate to the investigation and resolution of complaints
	Refer matter to the relevant statutory body within two days where the matter falls outside of the jurisdiction of the CMS and uniform member of the referral		
Investigation of complaints raised by beneficiaries			
Analyse complaints raised by beneficiaries as required by section 47 of the Medical Schemes Act	Analysis done within four days of receipt of complaint	Analysis of complaints was not always done within the four days of receipt	The Complaints Adjudication Unit experienced capacity constraints as there was a vacancy that was only filled after five months; the existing staff complement carried additional workload, hence they could not deliver as per the plan; the deliverables were compounded by the non-functioning of Telkom lines
Send correspondence to the complainant advising of the status of the complaint	Send correspondence within four days of receipt of complaint	Correspondences were not always sent within four days of receipt of complaint	
Send correspondence to the scheme for comments, as prescribed	Send correspondence within four days of receipt of complaint		

Performance information: performance v targets



Strategic objective 5 (continued)

We investigate and resolve complaints raised by beneficiaries and the public.

Key performance indicator	Target	Actual performance	Reason for deviation
Resolve complaints			
Analyse responses from schemes to make decisions or rulings	80% of decisions to be made in 60 days	Found 4 488 complaints to be valid ones; 54% were resolved within 60 days and 7% within 90 days; 39% of the complaints were not resolved within 90 days	The Complaints Adjudication Unit relies on input from the Clinical Unit prior to resolving complaints and capacity constraints at the Clinical Unit had a negative impact on our timeframes; the Unit had its own constraints due to the delay in filling a post after resignation of one legal officer; some matters had to be returned to schemes for proper responses
	20% of decisions to be made in 90 days		
Advise parties in writing of the decision made	Within a day of making a decision	Achieved	No deviation
Facilitate mediation meeting between the parties and resolve the complaint where there is a dispute of facts or where the need arises	Mediation meeting within eight days of receipt of a response from scheme	No activity performed as none of the matters required mediation meetings	No deviation
Handling appeals in terms of section 48 of the Medical Schemes Act			
Refer notices of appeal and indexed and paginated documentation to the Secretariat of the Appeals Committee; appearance before the committee when a need to provide information arises; develop and keep a scoreboard on all appeals lodged against our decisions and identify constraints, if any, in respect of overturned decisions	Within a day of receipt of a Notice of Appeal	30 appeals were heard: Howsley v DHMS, Hlubi v DHMS, Kotze v DHMS, Struck v DHMS, Holl v DHMS, Junod v Profmed, Mustafa v Metropolitan, Segooa v Hosmed, Butler v Polmed, Vorster v Fedhealth, Nortje v Spectramed, Du Toit v DHMS, De Jesus v DHMS, Topham v Spectramed, Botha v DHMS, Cattich v Compcare, Van der Merwe v Fedhealth, Kaplan v Profmed, Dunn v ProSano, Thusi v Polmed, Muller v DHMS, De Boers v Profmed, Pienaar v Fedhealth, Ludick v Genhealth, Giles v Momentum, Gates v Liberty, Van Wyk v Medihelp, Meyer v Bestmed, Taggart v Fedhealth, Le Roux v Medshield; 77% of these appeals were not sent to the Secretariat of the Appeals Committee within one day of receipt, as per the target	The administrative controls of appeals between the Complaints Adjudication Unit and the Legal Services Unit (Secretariat of Council) need to be improved to eliminate the delays in processing appeals

Strategic objective 6

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
Facilitate the development of Human Resources strategies			
Talent management: define definition for high-potential individual; align recruitment and selection strategy to clearly identify talent and high potential; develop programme so that employees understand their talent zones; link talent process to succession and career strategies; drive employee engagement and retain high-potential individuals	Talent management: a talent pool was identified consisting of individuals who have the ability, engagement, and aspiration to rise and succeed in more senior and more critical positions (30 November 2009)	HR engaged with consultants appointed on the Talent Management Strategy to finalise the implementation of the strategy; the development phase was completed in 2008-2009. In implementing this system, the following activities were concluded during 2009-2010: • acceptance of project plan and budget; a proposal for the implementation of the strategy outlining a project plan was developed and tabled to SMM outlining the process and cost implications. SMM accepted the proposal and proposed budget; • communication of strategy; consultative workshops were conducted with staff and management as part of the communication and change management process	No deviation; strategy over three years ending in 2011-2012
Succession management: define core competence/talent domains of individuals; define key jobs that need to be on the succession dashboard; scope talent, competency, and knowledge requirements per identified job; requirement for best fit and determine skills, knowledge, and capability-related gaps; determine plausible external candidates, identify right people through search processes; sense-making with individuals who are linked to the succession programme; individualised developmental programme	Sucession management: clear succession plan ensuring continued and progressive performance of the organisation (30 November 2009)	Executive leadership sessions were conducted for Heads and Managers of the senior management team	No deviation

Performance information: performance v targets

## Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Facilitate the development of Human Resources strategies (continued)</b>			
Career management: train and develop all staff and managers on the construct of contemporary career management, career conversations for managers; develop key competency, knowledge, and experience requirement set per job; develop a clear and coherent insight into own talents and development areas and link talent to jobs; link personal developmental objectives to training programmes	Career management: individual developmental plans with specific career goals and aspirations linked to organisational requirements (30 November 2009)	Development of competency and role-based proficiency system; this process has been conducted through one-on-one interaction with Heads of units' key staff and managerial and supervisory levels as part of the career management strategy	No deviation
Remuneration: implement the 2008-2009 remuneration recommendations	Remuneration: completed job evaluations and grading (1 April 2009)	Data upload and job evaluation process has been completed and has gone through month-end validation process upon which the new information was published on the Remchannel database (8 June 2009)	No deviation
	Salaries benchmarked against the market (1 April 2009)	Remchannel's recommendations on the job evaluation and salary benchmark exercise with similar organisations were approved by full Council on 29 May 2009 and implemented with effect from 1 April 2009 (backdated for two months)	No deviation
<b>Provide assistance programmes to encourage and maintain the well-being and productivity of employees</b>			
Wellness: promote wellness and health activities through annual health promotion days and participation in gym activities	Wellness: the life quality of employees is enhanced, and the impact of personal and family problems on their work alleviated	1. Employee wellness: Discovery & 702 Walk the Talk; 33 employees participated on 26 July 2009 2. Debt counselling: debt counselling was provided to full staff on 6 July 2009 to assist employees who are over-indebted 3. A Health & Wellness Day was hosted by Occupational Care South Africa (OCSA) on 21 August 2009; its main objective was to improve awareness of positive health behavior through wellness (lifestyle) screenings and to introduce individuals to the concept of wellness	No deviation

## Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Provide assistance programmes to encourage and maintain the well-being and productivity of employees (continued)</b>			
Counselling: provide confidential assistance or short-term counselling to those who are experiencing personal or work-related problems	Counselling: as per request	Four counselling sessions were provided to staff	No deviation
HIV/AIDS: implement recommendations of the HIV/AIDS Committee	HIV/AIDS: informed employees on matters relating to HIV/AIDS (May and November 2009)	HIV testing was provided to staff in June 2009 as part of Health Day promotion; HIV/AIDS Day was commemorated on 1 December 2009	No deviation
<b>Implement Affirmative Action and Employment Equity in line with national policy</b>			
Implement Employment Equity Plan for 2009-2012	Agreed equity goals and targets are used to guide recruitment (1 April 2009)	Employment Equity report (Form EEA2) and income differential statements (Form EEA4) for the period 1 April 2008 – 31 March 2009 were approved by the acting Registrar on 9 September 2009	No deviation
Prepare Employment Equity report for Department of Labour for 2009-2010	Progress regarding Employment Equity targets reported on to the Department of Labour (30 September 2009)	Progress report submitted to Department of Labour on 11 September 2009	No deviation
Engage the Employment Equity forum in monitoring and evaluating the Employment Equity Plan	Report presented to SMM on progress of implementation of the Employment Equity plan (quarterly)	Quarterly reports on Employment Equity data submitted to SMM	No deviation
<b>Managing performance</b>			
Provide support to employees and managers	Performance assessment workshops facilitated on how to use the tool, as well as on how to optimise the assessment (i.e. avoid bias, promote objectivity)(August 2009)	First performance review process for the period 2009-2010 was conducted in September and October; the finalised performance appraisal documents returned to HR at the end of October 2009; performance appraisal documentation for the final review for 2009-2010 was conducted in March 2010; HR rendered support to management and staff throughout the process	No assessment workshop to facilitate performance was conducted as there were no matters that warranted such a workshop; HR rendered support to management and staff throughout the process
Collate and table results to Moderating Committee	Moderated performance scores for first and second review (31 March 2010)	Scores were collated and submitted to Moderating Committee; in April 2010, moderating committee moderated scores and Heads were informed who is awarded performance bonuses	No deviation

Performance information: performance v targets

## Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Facilitate organisational training and development</b>			
Identify training priorities highlighted in career and succession strategy, i.e. develop competency models for management and leadership	Competencies developed for management and line functions (30 June 2009)	Management training provided in terms of training plan	No deviation
Implement new training plan for 2009-2010	Implementation of appropriate learning interventions in line with training policy facilitated (ongoing)	Members of staff registered at various institutions towards their professional development, and attended workshops, conferences, and seminars; the total cost for the period ending 31 March 2010 amounted to R1 230 158.29	No deviation
Prepare report on training interventions for submission to HWSETA	Workplace Skills Plan (WSP) complete and lodged with HWSETA (30 June 2009)	WSP and Annual Training Report for 2009-2010 completed and submitted to HWSETA by 30 June 2009	No deviation
<b>Implement internship programme</b>			
Implement approved internship programme	Needs of organisation with regards to interns identified	Internship policy and framework adopted	Not implemented due to insufficient office space and budget constraints
	Mentors identified and supported with mentorship raining (January 2010)	Target not achieved	Not implemented due to insufficient office space and budget constraints
	Internal training programmes for interns	Target not achieved	Not implemented due to insufficient office space and budget constraints
	Feeder institutions engaged to ensure that internship is in accordance with the line of study that students are following	Target not achieved	Not implemented due to insufficient office space and budget constraints

## Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Internal Finance</b>			
<b>Ensure financial management of the CMS in a manner that is consistent with the Public Finance Management Act and other applicable legislation</b>			
Accurate recording and processing of transactions in various books of first entry; correct allocation of account codes and cost codes in the processing of EFT transactions, cheques, and receipts; prepare accurate monthly management accounts and costing reports	Financial records: management reports are produced monthly to SMM and serve at Audit & Risk Committee and Council	Achieved target; management accounts were prepared for each month of the financial year and were presented to SMM, where applicable	No deviation
Collect all the invoices and receipts and any other relevant information needed for the making of provisions and prepayment; prepare an audit file; prepare a report on issues raised in the management letter and report progress to SMM, the Audit & Risk Committee, and Council; prepare AFS that comply with GAAP and GRAP; follow up on audit findings in management letter and workshop them with the Unit	Annual Financial Statements are prepared in accordance with the Generally Accepted Recognised Accounting Practices Accounting Principles (GAAP) and applicable Generally (GRAP), and submitted to relevant stakeholders, as prescribed by PFMA	Achieved target; unqualified audit opinion with emphasis of matter was received on the 2008-2009 Annual Financial Statements from the Auditor-General	No deviation
Facilitate the work of internal auditors; assess our materiality level; Risk Management Committee to report to management, the Audit & Risk Committee, and Council on the mitigation of identified risks	Effective and efficient internal controls are communicated and maintained within the organisation	Achieved target; new service provider SizweNtsaluba was appointed from 1 October 2009; they are replacing our previous service providers (ORCA)  Audit plan of new service provider still to be approved by the Audit & Risk Committee; four reports to be received according to draft audit plan; these reports were still in progress at year end (31 March 2010)  Internal Finance policies were revised and communicated to staff	Internal audit reports to be delivered by internal auditor according to the audit plan was still work in process at year end
Audit & Risk Committee meetings are held quarterly; preparation of documentation and distribution to Audit & Risk Committee members seven days before the meetings; communicate Audit & Risk Committee recommendations to	Audit & Risk Committee: constitution and functioning of Audit & Risk Committee as prescribed by PFMA	Achieved target; new Audit & Risk Committee members were appointed as from 1 October 2009, in compliance with PFMA; meetings took place as scheduled and prescribed	No deviation; an additional initiation Audit & Risk Committee meeting was held this year

Performance information: performance v targets

## Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Internal Finance</b> <b>Ensure financial management of the CMS in a manner that is consistent with the Public Finance Management Act and other applicable legislation (continued)</b>			
relevant structures of Council; review terms of reference of Audit & Risk Committee members annually; review audit charter and communicate to Audit & Risk Committee members annually; collect operational aligned month-to-month projections from Heads of cost centres; consolidate respective cost centres estimate budgets into the main budget; discuss final budget with Accounting Officer and Heads; submit annual budget to Council for approval	Budget management: a consolidated budget of estimated revenue and expenditure for that financial year is submitted to the Executive Authority six months before the financial year or another period agreed to.	Achieved target; monthly budget discussion meetings are held with the various Heads and Managers to ensure spending within approved budget and plan  Consolidated budget for the 2009-2010 financial year was submitted to the Executive Authority on 3 March 2009 and a resubmission was done on 30 March 2009; this is in line with our agreed timeframes	No deviation
Submit the proposed budget and operational plans with the proposed levy notice to the Executive Authority; publish the proposed levy notice in the <i>Government Gazette</i> for industry comments (30 days); submit levy imposition notice together with comments received to Executive Authority	Revenue management: imposition notice is published in the <i>Government Gazette</i> for 30 days after receiving approval from the Executive Authority; ensure improved debtor's collection system is maintained	A formal letter approving the regulatory plan and budget for 2009-2010 was received from Minister of Health on 7 May 2009  Imposition notice 510 of 2009 of levies on medical schemes was published on 15 May 2009  All levies for the 2009-2010 financial year were received	No deviation
Prepare monthly variance reports and discuss with the Heads of cost centres prior to presentation at SMM; quarterly variances are discussed with Heads; facilitate preparation of quarterly reports; mid-year review of budget to ensure consistency with approved operational plans and projected cash flow	Performance management: quarterly PFMA reports and review documents were submitted to the Executive Authority	Achieved target; quarter 4 of 2008-2009 and quarter 1 to 3 of 2009-2010 were submitted to the Executive Committee	No deviation

## Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Internal Finance</b> <b>Ensure financial management of the CMS in a manner that is consistent with the Public Finance Management Act and other applicable legislation (continued)</b>			
Develop Tender Committee guidelines, including standard request for proposal document; tender in line with Supply Chain Management limits; communicate Supply Chain Management changes to all staff; submit monthly report to Treasury as required by the Supply Chain Management framework	Procurement: review the Tender Committee guidelines annually and issue a standard request for proposal with each tender	Procurement always conducted in line with the guidelines of Supply Chain Management; three written quotations are always sought and where appropriate a tender is issued; one tender was awarded in 2009-2010	No deviation
Maintenance of an EFT system; adherence to investment policies; investment schedules are produced on a monthly basis and presented together with monthly management accounts; cash forecast/cash flow projections; bank accounts approved by Treasury	Cash management: investments are held with approved financial institutions and cash flow projections are done from time to time	Achieved target; all monies are held with approved institutions and our cash flow projections indicate that we will meet our operational requirements for the financial year	No deviation
Discuss risk register monthly with the Heads of cost centres; report quarterly to Risk Management Committee; update risk register with Internal Audit Reports and discuss changes with Unit Heads	Risk management: maintain an effective, efficient, and transparent system of risk management	Target partially achieved; risk register was updated on a monthly basis and discussed at SMM except in December 2009 and January 2010	No SMMs took place in December 2009 and January 2010; there was an ad hoc meeting in December 2009
<b>Information Systems &amp; Knowledge Management Unit</b> <b>Facilitate an efficient, focused, and educated workforce</b> <b>Render an effective and efficient IT Helpdesk support service within set target times</b>			
Log all calls on a Helpdesk support system	All calls logged and followed up to ensure satisfied end users	Target partially achieved; Helpdesk support services were rendered promptly but response times could not be properly measured	Enabling of time counter feature on the Adventnet Helpdesk system will assist in properly monitoring time taken to resolve a Helpdesk call
Respond to all logged calls within 30 minutes	All calls received by IT Helpdesk responded to within 30 minutes		
Keep Microsoft applications and operating systems updated on a daily basis	All Microsoft applications and operating systems updated with latest patches on a daily basis with WSUSS		
Ensure that all printers and photocopy machines function optimally	Printers and photocopy machines function with minimum downtime; a maximum of 20 minutes downtime will be allowed for minor problems and a 4-hour response time for major problems that need to be attended to by the OEM		

Performance information: performance v targets



Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
<b>Information Systems &amp; Knowledge Management Unit</b> <b>Facilitate an efficient, focused, and educated workforce</b> <b>Render an effective and efficient IT Helpdesk support service within set target times (continued)</b>			
Ensure that end-user desktop personal computers function optimally	Minor end-user desktop personal computer hardware and software issues attended to within 30 minutes and resolved within 4 hours and where vendor support is required, resolution of problems within 24 hours	Target partially achieved; Helpdesk support services were rendered promptly but response times could not be properly measured	Enabling of time counter feature on the Adventnet Helpdesk system will assist in properly monitoring time taken to resolve a Helpdesk call
<b>Educate staff on different IT systems and tools available within CMS as and when necessary</b>			
Training on the new integrated Case Management System	In-house group training sessions conducted once every month	Target partially achieved; training sessions conducted as new software was released, i.e. the new MOSS Document Centre, and not on a monthly basis as originally planned	Training sessions were originally planned on a monthly basis; training was only conducted when appropriate
New accreditation web part, new statutory reports web part, and new complaints web part	Starting May-March 2010		
Continued support on new and existing systems; create a short training manual on existing IT systems for HR to hand to new employees at induction	Training Manual November 2009		
<b>Ensure LAN infrastructure and related components are regularly tested and maintained</b>			
Test and maintain LAN infrastructure and related components (switches, routers etc.)	LAN infrastructure tested and maintained on an ongoing basis	Achieved target; LAN infrastructure was regularly tested and maintained by addition of new network points, testing of cables etc.	No deviation
<b>Ensure disaster recovery and data backup procedures are in place</b>			
Perform daily, weekly and monthly differential and full backups; ensure emergency electrical supply is maintained; ensure that environmental monitoring systems in server rooms function optimally	Backups performed as per schedule and tapes stored offsite; data restored on a monthly basis to test success of backups; UPS, GENSET and EMS systems maintained and services as per SLA schedules	Achieved target; all backups performed as per schedule and tested for restore; all UPS (Uninterrupted power Supply), generators, and EMS (Environmental Monitoring System) systems maintained by various providers as per Service Level Agreements (SLAs)	Weekly backups not taken offsite but kept in server room; monthly backups taken offsite; this is done to reduce costs and speedy restores

Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
Ensure adequate domain security measures are in place			
Security infrastructure tested and regularly checked for vulnerabilities, group policy fine-tuned and anti-virus measures deployed	Check intrusion detection, group policy and Sophos logs weekly to monitor possible intrusion attempts, virus outbreak, and perform a controlled penetration	Achieved target; intrusion detection checked on Firewall and ISA; latest antivirus deployed across enterprise and patches downloaded to servers and workstations; external penetration and security audits performed on our firewalls and routers and IP Guard deployed to ensure that unauthorised accesses to network resources are prevented	No deviation
Increase LAN speed to improve connectivity			
Configure switches to accommodate 1 GIG connectivity	All switches configured to accommodate a Gig network by end of June 2009	Achieved target; Gig network accommodated in new premises	Gig network is deployed across the network, but some users cannot get a Gig to their desk top because the mini-switch connected to their workstations cannot accommodate or transfer gigabit packets
Internet connectivity is monitored and optimally running at 100%			
Backup ADSL lines installed and monitored	Installation of a backup ADSL line with bandwidth management by end of April 2009	Achieved target; backup ADSL line with bandwidth management and 50Gig cap deployed as planned	No deviation
LAN infrastructure is constantly monitored			
Deployment of network monitoring tool to monitor switches and network backbone	Network performance improved as errors will be detected immediately and necessary steps taken – ongoing	Partially achieved; ongoing performance monitoring with MOM maintained; new network monitoring tool not deployed	A new monitoring tool could not be deployed due to budget constraints; a professional network tool cost more than what we budgeted for; Nagios was considered but it is mainly used in organisations that have WAN infrastructures and branch offices

Performance information: performance v targets

Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
Act as intermediary between the CMS and our stakeholders by providing relevant guidance and advice, thus rendering excellent customer service			
Effective handling of telephonic enquiries and queries as per industry norms and standards			
Ensure that the call waiting time is reduced in the Interactive Voice Recording	Call wait time limited to a maximum of 2 minutes; monitored by means of bi-weekly reports	Achieved target; call wait time in the Interactive Voice Recoding (IVR) and call abandon rate are within the set targets of 2minutes and 10% respectively; wrapping up calls took 3 seconds longer than originally targeted	We appointed two new call centre agents and it took them longer initially to wrap up calls; we expect the situation to have normalised by 2010
Ensure that the call abandon rate is reduced	Call abandon rate maintained below 10%; monitored by means of bi-weekly reports		
Ensure that all calls are wrapped up on time	Wrapping up of calls should not exceed an average of 10 seconds; monitored by means of bi-weekly reports		
Establish a new 086 number that will only be dedicated to the CMS Customer Care Centre	Achieve a smoother call flow and reduce queuing time		
Educate staff on the role and importance of the Customer Care Centre			
Conduct presentations during full staff meetings	Quarterly presentations; ongoing	Target partially achieved	An initial presentation was held to full staff and thereafter the call centre published informative articles in our internal newsletter <i>Masihambisane</i>
Develop a Customer Care Centre training manual	To be implemented in the second quarter of the financial year		
Actively manage and monitor all recorded verbal and written queries received			
Respond to all queries received; where information needs to be obtained from other Units the query will be escalated	Improve quality control by actively monitoring and managing calls; ongoing	Achieved	No deviation
Establish service policies with the various Units			
Negotiate, agree, and enter into service policies with all operating Units that we serve	Service policies outlining specific turnaround times and expectations with operating units to be implemented by end of April 2009	Partially achieved	Service level agreements were formulated, but they still need to be workshopped with key business units; the activity was carried over to the next financial year

Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
Improve information management through information processing, retrieval, and collection-building, focusing on the broad organisation			
Collection-building: process requests for books and journals as received by either ordering new ones or performing inter-library loans	Processing as and when books and journals are requested	Achieved	No deviation
Current awareness service	Making available latest legislation and other relevant information through online access to Parliamentary Monitoring, Legalbrief, EBSCO, SABINET online to staff of the CMS	Achieved	No deviation
Information processing: investigate several leading library catalogue systems	Acceptable library catalogue system identified for purchase by mid-May 2009	Achieved	No deviation
Install and configure new library system in close collaboration with ICT	New library system configured and installed by end of May 2009	Not achieved	Although we successfully identified a new library system, it was decided that the cost of such was too high and that the originally purchased Bookcat system needed to be revived
Deploy new library system search interface on E-Library and train end users	Search function made available on E-Library by mid-June 2009 and end users trained on ongoing basis	Achieved	No deviation
Promotion of Access to Information Act (POATIA)			
Comply with POATIA in terms of access to information by outside users			
Respond to queries after receipt of request	Ongoing: POATIA requests responded to within 30 days after receipt	Achieved	No deviation
Prepare and submit statistical information as prescribed by POATIA			
Preparation of statistical information: section 32 statistics (SAHRC); section 15 statistics (Department of Justice and Constitutional Affairs)	Statistics have to be prepared and submitted by end of April 2009	Achieved	No deviation
Improve online access on CMS website to POATIA			
Revamp the POATIA interface in close collaboration with ICT in order to make it user-friendly	POATIA interface revamped by end of June 2009	Achieved	No deviation

Performance information: performance v targets

Strategic objective 6 (continued)

We foster the continued development of the Council for Medical Schemes as an employer of choice.

Key performance indicator	Target	Actual performance	Reason for deviation
Promote the Resource Centre as a user-friendly entity among all Units in the CMS by making sure that the E-Library is fully utilised			
Include access to SABINET, Butterworths, and Legalbrief as part of the E-Library interface	Use of e-library increased by including SABINET, Butterworths, Legalbrief as part of the interface by end of June 2009	Achieved	No deviation
Develop a POATIA manual on how to access information from the CMS			
Preparation of manuals in three different languages as required by section 14 of POATIA	Manual to be prepared and ready by end of August 2009 in case there might be organisational changes	Achieved	No deviation
Records and knowledge management Comply with the National Archives and Records Services of South Africa Act of 1996			
Dedicated imaging processing	Assessment of the number of records to be scanned; appointment of scan bureau for bulk scanning – decision to scan forward or historical (records at Metrofile); actual scanning – minutes of SMM meetings, Council, EXCO; schemes rules file plan finalised and approved by end of May 2009	Achieved	No deviation and ongoing
Finalise CMS file plan by the addition of the IS & KM Unit and the Office of the Registrar, and re-submit to National Archives for final approval; transpose final file plan to our MOSS Document Centre for EDMS purposes	File plan transposed by mid-June 2009		
Establish a framework for organisational readiness for knowledge management			
Promote effective journal club and capture knowledge during sessions	Ongoing: engage R&M Unit regarding the operation of the Journal Club and come up with strategies to tap into knowledge during sessions	Not achieved	Due to lack of interest, CMS Journal Club meetings were suspended

Strategic objective 7

We develop strategic alliances nationally, regionally, and internationally.

Key performance indicator	Target	Actual performance	Reason for deviation
Conclude Memorandum of Understanding with relevant stakeholders (such as the FSB)			
Prepare and enter into an MoU with relevant stakeholders	Formal signed MoUs and implementation thereof	Target not met	The position of Registrar remained vacant for the whole financial year; the acting Registrar was therefore overwhelmed with other strategic objectives

Performance information: performance v targets

# Risk Equalisation Fund

We serve the beneficiaries of medical schemes and associated stakeholders by preparing the Office of the Registrar for a system of risk equalisation that will equalise the costs faced by beneficiaries for prescribed benefits. By doing this, we help the Council for Medical Schemes achieve government's objective of a system of fair cross-subsidies for health risks.

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

Key performance indicator	Target	Actual performance	Reason for deviation
Establish techniques to evaluate REF submissions through more research on scheme-specific expected values			
Calculate scheme-specific expected values for both 2008 and 2009 submissions	Ready for use in the evaluation of REF submissions in April and August 2009 respectively	Scheme-specific expected values were used to good effect	No deviation
	Consultative monograph published on the application of clustering techniques used to arrive at scheme-specific expected REF risk factor values (May 2009)	Final draft approved by external editor only in April 2010	Delay in the establishment of a peer review panel; competing priorities
Establish techniques to evaluate REF submissions through more research on the expected variation of REF risk factors in schemes			
Research alternative approaches for the establishment of DIN scores	Dependent on the outcome of the research on scheme-specific expected values; ready for use in the evaluation of REF submissions in April and August 2009 respectively	Used in the evaluation of REF submissions	No deviation
	Consultative monograph published on the application of indexing (scoring) techniques to establish scores used in the evaluation of REF submissions (April 2009)	Final draft approved by external editor only in April 2010	Delay in the establishment of a peer review panel; competing priorities
Confirm the level of REF risk factors established in the REF risk factor studies			
Establish benchmark levels for REF risk factors from other independent sources	Consultative monograph published on comparative benchmark values for selected REF risk factors (September 2009)	Not done	PMB review project took on a much larger emphasis than initially planned; it was agreed with management that this work must not be performed and that the PMB review should instead be given priority
Revised REF weighting tables and Entry & Verification Criteria			
Revised Entry & Verification Criteria and REF Weighting Tables	Publication of: – Entry & Verification Criteria Guidelines (August 2009) – REF Weighting Tables for 2009 (September 2009) – REF risk factor and pricing analysis based on reviewed PMBs (March 2010)	Entry & Verification Criteria Guidelines and REF Weighting Tables published; REF risk factors not reviewed	There were no structural changes to PMBs which negated the need to review the REF risk factors

# Risk Equalisation Fund (continued)

Key performance indicator	Target	Actual performance	Reason for deviation
Support the PMB review process with analysis of data sets; recommend changes to regulations			
Complete the consultative process on the PMB review; complete costing of an essential PMB package; recommend the PMB package that should be implemented with the introduction of REF; REF risk factor and pricing analysis based on reviewed PMBs	PMB review principles and framework established by April 2009	Completed	No deviation
	Depending on access to external data, final report on cost and affordability by September 2009	Cost impact of revisions was based on 2005 REF study	There were no structural changes to PMBs which negated the need for cost data on new PMBs
	Draft Regulations to introduce the revised PMB package submitted to the Ministry of Health by March 2010	Completed	No deviation
Analysis of REF returns: evaluate REF submissions and report back to schemes			
Q1 to Q4 of 2008: annual report; Q1 and Q2 of 2009: limited feedback; Q1 to Q4 of 2009: annual report	Delivery of feedback reports and discussions with schemes in July and December 2009, July 2010	Report on 2008 REF returns published; report on the first two quarters of 2009 were not published; work has started on the analysis of 2009 returns	Problems with the quarterly returns system prevented access to the quarterly returns data which is used by the REF Unit to analyse the REF returns
Perform audits on REF data			
Implement the REF audit module on de-personalised data sets	Audit report on the submission of REF shadow data for selected schemes	Not done	The REF audit module was designed in accordance with the REF Entry & Verification Criteria Guidelines, which are not legislated; in the absence of enabling legislation, schemes cannot be forced to maintain data in the proposed format (and they do not)
Legal framework: support the Department of Health in finalising amendments to the Medical Schemes Act which will enable and support the systems of the Risk Equalisation Fund			
Do more work which should inform revisions to the Medical Schemes Amendment Bill and start working on the regulations; analyses to support recommendations on the timing of the introduction of the various provisions introduced in the Bill; draft regulations	Report on analysis	Not done	The Medical Schemes Amendment Bill was not considered by Parliament
	Draft Regulations	Not done	The Medical Schemes Amendment Bill was not considered by Parliament

Performance information: performance v targets





# Risk Equalisation Fund (continued)

Key performance indicator	Target	Actual performance	Reason for deviation
Organisation building: prepare and enable the Office to deal with the CMS policy and governance around the Risk Equalisation Fund (continued)			
Improved customer focus; introduce a Net Promoter Score; build organisational culture; review values; internal workshop in April 2009	Completed review in line with legislated functions	Not done	The Medical Schemes Amendment Bill was not considered by Parliament
	NPS scoring system (April 2009)	Not done	Instead of the NPS system, a more appropriate value-driven approach was followed
	Increased performance	A value-driven approach was successfully applied	No deviation
Information Technology: develop and maintain IT systems to support the risk equalisation process from shadow cycle through dry run to live cycle			
Complete the REF IT system in accordance with tender specifications	Tested registry reports and workflow systems by July 2009	Only the REF audit module was completed	During the testing of the bulk data upload process, problems were experienced with the system that could not be repaired in time by the contractor; the contract with the developer came to an end in December 2009

Not all the targets listed in the operational plan for the CMS financial year 2009-2010 are reported on in the above report as they are of an operational nature and/or consolidated into one target for reporting purposes.



A decade of achieving



“The greater danger for most of us lies not in setting our aim too high and falling short, but in setting our aim too low and **achieving** our mark.”

**Michelangelo**  
Italian artist

## Report of the Auditor-General to Parliament on the financial statements of the Council for Medical Schemes for the year ended 31 March 2010

# Report on the financial statements

### Introduction

I have audited the accompanying financial statements of the Council for Medical Schemes which comprise the statement of financial position as at 31 March 2010, the statement of financial performance, the statement of changes in net assets and cash flow statement for the year then ended, and a summary of significant accounting policies and other explanatory information, as set out on pages 127-146.

### Accounting Authority's responsibility for the financial statements

The Accounting Authority is responsible for the preparation and fair presentation of these financial statements in accordance with the South African Standards of Generally Recognised Accounting Practice (SA Standards of GRAP) and in the manner required by the Public Finance Management Act of South Africa (PFMA). This responsibility includes: designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

### Auditor-General's responsibility

As required by section 188 of the Constitution of South Africa and section 4 of the Public Audit Act of South Africa, my responsibility is to express an opinion on these financial statements based on my audit.

I conducted my audit in accordance with International Standards on Auditing and *General Notice 1570 of 2009* issued in *Government Gazette 32758 of 27 November 2009*. Those standards require that I comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor

considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

## Opinion

In my opinion, the financial statements present fairly, in all material respects, the financial position of the Council for Medical Schemes as at 31 March 2010 and its financial performance and its cash flows for the year then ended in accordance with SA Standards of GRAP and in the manner required by the PFMA.

## Report on other legal and regulatory requirements

In terms of the PAA of South Africa and *General Notice 1570 of 2009*, issued in *Government Gazette 32758 of 27 November 2009*, I include below my findings on the report on predetermined objectives, compliance with the PFMA, Preferential Procurement Policy Framework Act (PPPFA), and financial management (internal control).

### Predetermined objectives

#### Usefulness of reported performance information

The following criteria were used to assess the usefulness of the planned and reported performance:

- Consistency: Has the Council for Medical Schemes reported on its performance with regard to its objectives, indicators, and targets in its approved strategic plan, i.e. are the objectives, indicators, and targets consistent between planning and reporting documents.

The following audit finding relates to the above criteria:

#### Incomplete reporting on all predetermined objectives, indicators, and targets

The actual achievements with regard to 45% of all planned indicators and targets specified in the strategic plan for the year under review were not reported in the annual performance report submitted for audit purposes.

#### Reliability of reported performance information

The following criteria were used to assess the reliability of the planned and reported performance:

- Validity: Has the actual reported performance occurred and does it pertain to the entity, i.e. can the reported performance be traced back to the source data or documentation.

The following audit finding relates to the above criteria:

#### Reported targets not reliable when compared to source information

For the following reported target that was material by nature, 80% of the reported target was not valid on the basis of the source information or evidence provided to support the reported target: *Resolve complaints: 80% of the decisions will be made in 60 days; 20% of the decisions will be made in 90 days.*

### Compliance with laws and regulations

#### Public Finance Management Act (Act 1 of 1999) (PFMA)

##### Treasury Regulations (TR)

##### Non-adherence to requirements

- Contrary to the requirements of TR 30.2.1, the quarterly reports of the Council for Medical Schemes did not track progress against outputs, indicators, and targets as per the approved strategic plan and therefore did not facilitate effective performance monitoring and evaluation.
- Contrary to the requirements of TR 30.1.3, the strategic plan of the Council for Medical Schemes was prepared for one year and did not cover a three-year period.

### INTERNAL CONTROL

I considered internal control relevant to my audit of the financial statements and the report on predetermined objectives and compliance with the PFMA and PPPFA, but not for the purposes of expressing an opinion on the effectiveness of internal control. The matters reported below are limited to the deficiencies identified during the audit.

- Leadership: Policies and procedures were not developed and implemented to support the recording and reporting of performance information.

Auditor - General

Pretoria  
30 July 2010



*Auditing to build public confidence*





A decade of **adapting**

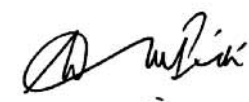


“The reasonable man **adapts** himself to the world; the unreasonable man insists on **adapting** the world to himself; therefore, all progress depends on the unreasonable man.”

**George Bernard Shaw**  
Irish playwright

## Statement of financial position of the Council for Medical Schemes as at 31 March 2010

	Notes	2010 R	2009 R
<b>ASSETS</b>			
<b>Non-current assets</b>		<b>4,055,062</b>	<b>4,784,857</b>
Property, plant and equipment	3	2,770,942	3,180,729
Intangible assets	4	1,284,120	1,604,128
<b>Current assets</b>		<b>16,296,412</b>	<b>14,972,291</b>
Trade and other receivables	5	1,875,195	643,905
Cash and cash equivalents	6	14,421,217	14,328,386
<b>Total assets</b>		<b>20,351,474</b>	<b>19,757,148</b>
<b>LIABILITIES</b>			
<b>Non-current liabilities</b>		<b>73,455</b>	<b>378,489</b>
Operating lease payable	7	73,455	378,489
<b>Current liabilities</b>		<b>6,039,278</b>	<b>7,902,419</b>
Trade and other payables	8	2,312,830	3,660,475
Provisions	9	3,726,448	4,241,944
<b>Total liabilities</b>		<b>6,112,733</b>	<b>8,280,908</b>
<b>Net assets</b>		<b>14,238,741</b>	<b>11,476,240</b>
<b>NET ASSETS</b>			
<b>Reserves</b>			
Accumulated surplus		14,238,741	11,476,240
<b>Total net assets</b>		<b>14,238,741</b>	<b>11,476,240</b>



**Prof. William Pick**  
Chairperson  
Council for Medical Schemes  
26 July 2010

## Statement of financial performance

of the Council for Medical Schemes for the year ended 31 March 2010

Budget		Notes	Actual	
2010 R	2009 R		2010 R	2009 R
<b>70,573,924</b>	<b>59,889,485</b>		<b>64,939,465</b>	<b>57,242,153</b>
60,046,397	51,077,844		61,074,465	51,091,153
10,527,527	8,811,641		3,865,000	6,151,000
<b>69,013,022</b>	<b>61,142,389</b>		<b>63,834,334</b>	<b>58,181,027</b>
9,004,037	7,608,022		7,587,443	7,037,863
920,000	705,760		1,110,053	684,904
9,801,497	10,575,478		10,326,925	8,954,441
48,267,488	41,653,130		42,400,659	38,992,410
840,000	600,000		1,246,901	1,303,304
180,000	-		1,162,353	1,208,105
<b>1,560,902</b>	<b>(1,252,904)</b>		<b>1,105,131</b>	<b>(933,874)</b>
-	-		(2,095)	18,741
1,400,000	1,400,000		1,659,465	2,145,788
-	-		-	97,628
<b>2,960,902</b>	<b>147,096</b>		<b>2,762,501</b>	<b>1,128,027</b>

## Statement of changes in net assets

of the Council for Medical Schemes for the year ended 31 March 2010

	Notes	2010 R	2009 R
<b>Accumulated surplus as at 1 April 2009 – previously reported</b>		<b>7,820,713</b>	<b>3,675,102</b>
Change in accounting policy with respect to government grants	18	3,655,527	6,673,111
<b>Accumulated surplus as at 1 April 2009 – restated reported</b>		<b>11,476,240</b>	<b>10,348,213</b>
Surplus for the period		2,762,501	1,128,027
<b>Accumulated surplus as at 31 March 2010</b>		<b>14,238,741</b>	<b>11,476,240</b>

## Cash flow statement

of the Council for Medical Schemes for the year ended 31 March 2010

Notes	2010 R	2009 R
<b>Cash flows from operating activities</b>		
Cash receipts from customers	63,708,175	57,082,627
Cash receipts from debtors	59,843,175	50,931,627
Cash receipts from grant	3,865,000	6,151,000
Cash paid to suppliers and employees	(63,593,255)	(53,993,573)
Cash generated from operations	114,921	3,089,054
Interest received	1,659,465	2,145,788
Interest paid	-	(97,628)
<b>Net cash flow from/(used in) operating activities</b>	<b>1,774,386</b>	<b>5,137,214</b>
<b>Cash flows from investing activities</b>		
Acquisition of property, plant and equipment	(863,325)	(708,814)
Acquisition of intangible assets	(842,345)	(735,314)
Proceeds from sale of equipment	24,115	37,790
<b>Net cash flow from/(used in) investing activities</b>	<b>(1,681,555)</b>	<b>(1,406,338)</b>
<b>Net increase in cash and cash equivalents</b>	<b>92,831</b>	<b>3,730,876</b>
Cash and cash equivalents at beginning of the year	14,328,386	10,597,510
<b>Cash and cash equivalents at the end of the year</b>	<b>14,421,217</b>	<b>14,328,386</b>



# Notes to the financial statements

## of the Council for Medical Schemes for the year ended 31 March 2010

### 1. Legislation

The Council for Medical Schemes (CMS) is a listed entity under schedule 3 of the Public Finance Management Act (Act 1 of 1999) and domiciled in South Africa. The address of its registered offices is Block E, Hadefields, 1267 Pretorius Street, Hatfield. As the regulatory authority responsible for overseeing the medical schemes industry in South Africa, the CMS administers and enforces the Medical Schemes Act 131 of 1998. It is accountable to the Minister responsible for national health matters. The CMS collects levies from schemes in terms of the Levies Act 2000 (Act 58 of 2000).

### 2. Accounting policies

The principal accounting policies adopted in the preparation of these financial statements are set out below and are consistent with those of the previous year:

#### 2.1 Basis of preparation

The financial statements have been prepared in accordance with the effective Standards of Generally Recognised Accounting Practices (GRAP), including any interpretations, guidelines, and directives issued by the Accounting Standards Board.

#### 2.2 Property, plant and equipment

All items of property, plant, and equipment are recognised at cost when it is probable that future economic benefits associated with the item will flow to the CMS and the cost of the item can be measured reliably.

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, on the same basis. The carrying amount of the replaced part is derecognised. All other repairs and maintenance are charged to the statement of performance during the financial period in which they are incurred.

Subsequent to recognition, property, plant, and equipment are stated at cost less accumulated depreciation and any accumulated impairment losses.

All items of property, plant, and equipment are depreciated when they are available for use and the CMS continues to depreciate these items until they are derecognised. Depreciation is provided for on a straight-line basis to write off the cost of each asset to its residual value over the estimated useful life, at the following annual rates:

Computer equipment	25%
Computer software	33%
Furniture and fittings	10%
Motor vehicle	20%
Library books	20%
Other fixed assets	10%

The residual values, useful life, and depreciation method of all items of property, plant, and equipment are reviewed at each financial year-end to ensure that the amount, method, and period of depreciation are consistent with previous estimates and the expected pattern of consumption of the future economic benefits embodied in the items of property, plant, and equipment.

The carrying amount of assets, is reviewed at each reporting date to determine whether there is any indication of impairment. Where the carrying amount of an asset is greater than its estimated recoverable amount, it is written down immediately to its recoverable amount. These impairment losses are recognised in surplus of deficit in the period in which it arises.

An item of property, plant, and equipment is derecognised upon disposal or when no future economic benefits are expected from its use or disposal. The difference between the net disposal proceeds, if any, and the net carrying amount is recognised in the statement of financial performance.

Assets embodying service potential but not necessarily generating economic benefits also qualify for recognition as property, plant, and equipment.

#### 2.3 Intangible assets

##### (a) Acquired software

Acquired computer software is capitalised on the basis of the costs incurred to acquire and bring to use the specific software.

##### (b) Developed software

Costs that are directly associated with the development of identifiable software products controlled by the CMS, and which will probably generate economic benefits, exceeding costs beyond one year, are recognised as intangible assets.

These costs are amortised over their estimated useful lives.

Amortisation is provided for on a straight-line basis to write off the cost of each asset over the estimated useful life, at the following annual rates:

Acquired software	33%
Developed software	33%

The useful life and amortisation method of all items of intangible assets are reviewed at each financial year-end to ensure that the amount, method, and period of amortisation are consistent with previous estimates and the expected pattern of consumption of the future economic benefits embodied in the items of intangible assets.

The carrying amount of assets, is reviewed at each reporting date to determine whether there is any indication of impairment. Where the carrying amount of an asset is greater than its estimated recoverable amount, it is written down immediately to its recoverable amount. These impairment losses are recognised in surplus of deficit in the period in which it arises.

An item of intangible assets is derecognised upon disposal or when no future economic benefits are expected from its use or disposal. The difference between the net disposal proceeds, if any, and the net carrying amount is recognised in the statement of financial performance.



Assets embodying service potential but not necessarily generating economic benefits also qualify for recognition as property, plant and equipment.

Judgements used for recognition of internally generated intangible assets: The recognisable cost of the internally developed software is estimated to be the number of days spent on development multiplied by the relevant rate per day of the IT personnel involved in the development.

## 2.4 Trade and other receivables

Accounts receivables are carried at fair value less provision made for impairment in value of these receivables. Where circumstances reveal doubtful recovery of amounts outstanding, a provision for impaired receivables is made and charged to the statement of financial performance.

## 2.5 Trade and other payables

Trade and other payables are recognised at fair value less principal payments and amortisations.

## 2.6 Provisions

Provisions are recognised when there is a present legal or constructive obligation as a result of past events, when it is probable that an outflow of resources will be required to settle the obligation, and when a reliable estimate of the amount can be made.

## 2.7 Revenue

Revenue is recognised when it is probable that future economic benefits or service potential will flow to the entity and these benefits can be measured reliably.

### 2.7.1 Revenue from exchange transactions

Revenue from exchange transactions is transactions in which the CMS receives assets or services or has liabilities extinguished, and directly gives approximately equal value exchange. The main sources of revenue from exchange transactions are:

#### (a) Accreditation fees

Accreditation fees are fixed tariffs paid by brokers, administrators, and manage care organisations over two years. Accreditation fees are recognised in the financial period in which services are rendered.

#### (b) Appeal fees

Appeal fees are fixed tariffs paid by appellants when appealing to the Appeal Board. Appeal fees are recognised in the financial period in which the appeal was raised and services were rendered.

#### (c) Levies

Levies are the amounts paid by medical schemes based on the number of members in a scheme during the financial period. Levies are recognised on an accrual basis in accordance with the number of members in the medical scheme in the period they fall due.

#### (d) Registration fees

Registration fees relate to the amounts paid by schemes to register or amend their rules. Registration fees are recognised in the financial period that they fall due.

#### (e) Sundry income

All other revenue received not in the normal operations of the CMS are recognised as revenue when future economic benefits flow to the CMS and these benefits can be measured reliably.

### 2.7.2 Revenue from non-exchange transactions

Revenue from non-exchange transactions is transactions that are not exchange transactions. The main sources of revenue from non-exchange transactions are:

#### (a) Government grants

The CMS receives grants from the National Department of Health for specific projects. These grants are recognised when it is probable that the future economic benefits will flow to the CMS and when the amount can be measured reliably. Revenue recognised as a consequence of a transfer is measured at the fair value of the assets recognised as at the date of recognition. A grant is recognised as non-exchange revenue to the extent that there is no further obligation arising from the receipt of the transfer payment.

## 2.8 Cash and cash equivalents

Cash and cash equivalents are carried on the statement of financial position at cost for the purpose of the cash flow statement. Cash and cash equivalents comprise cash on hand and deposits held in current and call accounts at the bank.

## 2.9 Financial instruments

### (a) Accounting for financial instruments

Financial instruments carried on the statement of financial position include cash and bank balances, investments, receivables, and trade creditors. The particular recognised methods adopted are disclosed in the individual policy statements associated with each item.

### (b) Financial risk management

#### Financial risk factors

The activities of the CMS expose it to a limited degree of financial risks, including interest rates and credit defaults.

#### Interest rate risk

The income and operating cash flows of the CMS are to a large extent independent of charges in the market interest rates. The CMS invests surplus cash on call accounts. Its exposure to interest rate risk is limited by virtue of the limited term that surplus cash is held on call.

### Credit risk

The CMS is exposed to credit risk, which is the risk that a counterpart will be unable to pay accounts in full when due. There is no significant concentration of credit risk due to a wide spread of debtors that owe amounts to the CMS.

### Liquidity risk

The CMS is exposed to liquidity risk by virtue of having trade creditors at year-end. Liquidity risk is managed by maintaining sufficient balances on cash and cash equivalents.

## 2.10 Research costs

Research costs relate to work performed by the Research & Monitoring Unit of the CMS. The objective of the unit is to monitor the impact of the Medical Schemes Act (Act 131 of 1998), research developments, and recommend policy options to improve the regulatory environment. Research expenditure is recognised as an expense in the financial period in which it was incurred.

## 2.11 Operating lease

Payments made under operating leases (leases other than finance leases) are charged to the statement of financial performance on a straight-line basis over the period of the lease. When an operating lease is terminated before the lease period has expired, any payment required to be made to the lessor by way of a penalty is recognised as an expense in the period in which termination takes place.

## 2.12 Effect of new Standards of GRAP

The following Standards of GRAP became effective on 1 April 2009 and have been adopted by the CMS. This adoption did not result in any additional disclosure or change in accounting policy.

Reference	Topic
GRAP 1	Presentation of financial statements
GRAP 2	Cash flow statements
GRAP 3	Accounting policies, changes in accounting estimates and errors
GRAP 4	The effects of changes in foreign exchange rates
GRAP 5	Borrowing costs
GRAP 6	Consolidated and separate financial statements
GRAP 7	Investments in associates
GRAP 8	Interests in joint ventures
GRAP 9	Revenue from exchange transactions
GRAP 10	Financial reporting in hyperinflationary economies
GRAP 11	Construction contracts

Reference	Topic
GRAP 12	Inventories
GRAP 13	Leases
GRAP 14	Events after the reporting date
GRAP 16	Investment property
GRAP 17	Property, plant, and equipment
GRAP 19	Provisions, contingent liabilities, and contingent assets
GRAP 100	Non-current assets held for sale and discontinued operations
GRAP 101	Agriculture
GRAP 102	Intangible assets

At the date of authorisation of the financial statements for the year ended 31 March 2010, the following Standards of GRAP were approved and issued but not yet effective:

GRAP 21	Impairment of non-cash-generating assets
GRAP 23	Revenue from non-exchange transactions (taxes and transfers)
GRAP 25	Employee benefits
GRAP 26	Impairment of cash-generating assets
GRAP 103	Heritage assets
GRAP 104	Financial instruments

The adoption of GRAP 23, *Revenue from non-exchange transactions*, will affect the financial statements as disclosed in note 18. The effect of adopting the other standards noted has not yet been determined but will be applied after the effective date.

## 2.13 Presentation currency

All amounts have been presented in the currency of the South African Rand which is the functional currency of the CMS.

## 2.14 Contingent liabilities

A contingent liability is a possible obligation that arises from past events and whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the CMS; or a present obligation that arises from past events but is not recognised because: (i) it is not probable that an outflow of resources embodying economic benefits or service potential will be required to settle the obligation; or (ii) the amount of the obligation cannot be measured with sufficient reliability.

## 2.15 Budget information

The approved budget covers the fiscal period from 1 April 2009 to 31 March 2010. Budget resources were obtained and used in accordance with the legally adopted budget. Except for non-exchange revenue, both the financial statements and the annual budget adopt the accrual basis of accounting.



### 3. Property, plant, and equipment

	Computer equipment R	Computer software R	Furniture and fittings R	Motor vehicle R	Library books R	Other fixed assets R	Total R
<b>Year ended 31 March 2010</b>							
Opening net book amount at 1 April 2009	1,276,424	202,289	1,370,491	42,311	-	289,214	3,180,729
Cost	5,300,217	1,214,097	2,859,252	139,885	42,014	412,556	9,968,021
Accumulated depreciation	(4,023,793)	(1,011,808)	(1,488,761)	(97,574)	(42,014)	(123,342)	(6,787,292)
Additions for the year	276,851	75,810	389,916	-	-	120,748	863,325
Disposals at net book value	-	-	(26,211)	-	-	-	(26,211)
Depreciation charge	(712,560)	(157,166)	(300,527)	(29,977)	-	(48,671)	(1,246,901)
Closing net carrying amount at 31 March 2010	840,715	120,933	1,433,669	14,334	-	361,291	2,770,942
Closing net carrying amount at 31 March 2010	840,715	120,933	1,433,669	14,334	-	361,291	2,770,942
Cost	5,533,790	1,289,907	3,150,400	139,885	42,014	533,305	10,689,301
Accumulated depreciation	(4,693,075)	(1,168,974)	(1,716,731)	(125,551)	(42,014)	(172,014)	(7,918,359)
Gross carrying amount of fully depreciated property, plant and equipment still in use	2,368,405	748,850	121,275	-	42,014	-	3,208,544
<b>Year ended 31 March 2009</b>							
Opening net book amount at 1 April 2008	1,637,455	362,451	1,477,441	69,943	9	288,542	3,835,841
Cost	5,033,377	1,336,388	2,698,064	139,885	42,014	372,897	9,622,625
Accumulated depreciation	(3,395,922)	(973,937)	(1,220,623)	(69,942)	(42,005)	(84,355)	(5,786,784)
Additions for the year	402,964	70,988	195,203	-	-	39,659	708,814
Disposals at net book value	(29,802)	(4,090)	(26,730)	-	-	-	(60,622)
Depreciation charge	(734,193)	(227,060)	(275,423)	(27,632)	(9)	(38,987)	(1,303,304)
Closing net carrying amount at 31 March 2009	1,276,424	202,289	1,370,491	42,311	-	289,214	3,180,729
Closing net carrying amount at 31 March 2009	1,276,424	202,289	1,370,491	42,311	-	289,214	3,180,729
Cost	5,300,217	1,214,097	2,859,252	139,885	42,014	412,556	9,968,021
Accumulated depreciation	(4,023,793)	(1,011,808)	(1,488,761)	(97,574)	(42,014)	(123,342)	(6,787,292)
Gross carrying amount of fully depreciated property, plant, and equipment still in use	2,367,499	496,476	-	-	42,014	-	2,905,989

### 4. Intangible assets

	Acquired software R	Developed software R	Total R
<b>Year ended 31 March 2010</b>			
Opening net book amount at 1 April 2009	1,489,974	114,154	1,604,128
Cost	3,775,518	376,137	4,151,655
Accumulated amortisation	(2,285,544)	(261,983)	(2,547,527)
Additions for the year	493,507	348,838	842,345
Disposals at net book value	-	-	-
Amortisation	(1,030,302)	(132,051)	(1,162,353)
Closing net carrying amount at 31 March 2010	953,178	330,942	1,284,120
Closing net carrying amount at 31 March 2010	953,179	330,941	1,284,120
Cost	4,269,025	724,974	4,993,999
Accumulated amortisation	(3,315,846)	(394,033)	(3,709,879)
Gross carrying amount of fully amortised intangible assets still in use	1,410,809	-	1,410,809
<b>Year ended 31 March 2009</b>			
Opening net book amount at 1 April 2008	1,866,505	206,324	2,072,829
Cost	2,871,823	351,239	3,223,062
Accumulated amortisation	(1,005,318)	(144,915)	(1,150,233)
Additions for the year	710,416	24,898	735,314
Disposals at net book value	4,090	-	4,090
Amortisation	(1,091,037)	(117,068)	(1,208,105)
Closing net carrying amount at 31 March 2009	1,489,974	114,154	1,604,128
Closing net carrying amount at 31 March 2009	1,489,974	114,154	1,604,128
Cost	3,775,518	376,137	4,151,655
Accumulated amortisation	(2,285,544)	(261,983)	(2,547,527)
Gross carrying amount of fully amortised intangible assets still in use	111,793	-	111,793

## 5. Trade and other receivables

Accounts receivable  
Sundry debtors  
Prepaid expenses

At 31 March 2010 the carrying amount of trade and other receivables approximated their fair values due to the short-term maturities of these assets. The estimated future cash flow receipts have not been discounted as the effect would be immaterial.

## 6. Cash and cash equivalents

Cash and bank  
Call account  
Fixed deposit

Cash and cash equivalents only include items held for the purpose of meeting short-term cash commitments rather than for investing or other purposes. Cash and cash equivalents have a maturity of less than three months and insignificant risk of changes in fair value.

## 7. Operating lease commitments

Opening balance as at 1 April 2009  
Movement for the year  
Closing balance as at 31 March 2010

## 8. Trade and other payables

Accounts payable  
Accruals  
Broker fees received in advance

At 31 March 2010 the carrying amount of trade and other payables approximated their fair values due to the short-term maturities of these liabilities.

## 9. Provisions

Leave days  
Opening balance  
Utilisation of provision during the year  
Provision made during the current year

Leave day provision is calculated in accordance with section 21 and 35 of the Basic Conditions of Employment Act. Leave days accrued at year-end need to be utilised before 30 September of the following financial year.

Performance bonuses  
Opening balance  
Utilisation of provision during the year  
Provision made during the current year

Performance bonus is the reward for outstanding performance of employees who performed well during the financial year. Provided in terms of our performance management policy, they are payable no later than by 30 June each year.

Other provisions  
Opening balance  
Utilisation of provision during the year  
Reversal of unused provision  
Provision made during the current year

**Total**

Notes	2010 R	2009 R
	15,632	11,337
	1,228,964	167,621
	630,599	464,947
	<b>1,875,195</b>	<b>643,905</b>
	4,421,217	10,330,591
	-	3,997,795
	10,000,000	-
	<b>14,421,217</b>	<b>14,328,386</b>
	378,489	467,007
	(305,034)	(88,518)
	<b>73,455</b>	<b>378,489</b>
	1,294,957	2,677,813
	471,594	444,230
	546,279	538,432
	<b>2,312,830</b>	<b>3,660,475</b>
	1,117,029	1,146,685
	1,146,685	918,776
	(3,303,505)	(2,257,773)
	<b>3,273,849</b>	<b>2,485,682</b>
	2,609,419	2,257,343
	2,257,343	2,005,839
	(2,257,343)	(2,005,694)
	<b>2,609,419</b>	<b>2,257,198</b>
	-	837,916
	837,916	527,956
	(547,331)	(527,956)
	(356,947)	-
	66,362	837,916
	<b>3,726,448</b>	<b>4,241,944</b>

Budget	
2010 R	2009 R
5,500,000	6,500,000
-	-
48,846,397	41,627,844
400,000	450,000
5,300,000	2,500,000
<b>60,046,397</b>	<b>51,077,844</b>
10,527,527	8,811,641
<b>10,527,527</b>	<b>8,811,641</b>
36,000	40,000
1,174,530	702,512
3,416,626	3,182,681
154,000	114,000
364,376	232,471
163,500	150,000
332,610	381,591
137,844	67,408
300,000	400,000
237,224	225,024
254,589	64,652
47,084	34,605
2,113,326	1,676,930
272,328	336,149
<b>9,004,037</b>	<b>7,608,022</b>
470,000	353,000
450,000	352,760
<b>920,000</b>	<b>705,760</b>

## 10. Revenue

### 10.1 Revenue from exchange transactions

Accreditation fees  
Appeal fees  
Levies income  
Registration fees  
Sundry income

### 10.2 Revenue from non-exchange transactions

Government grants

## 11. Administrative expenses

Bank charges  
Building expenses  
Building expenses – rental  
Courier and postage  
General administrative expenses  
Insurance  
Printing and stationery  
Refreshments  
Rental – copiers  
Repairs and maintenance  
Security  
Subscriptions  
Telecommunication expenses  
Travel

## 12. Administrative expenses

Auditors' remuneration – external audit  
Auditors' remuneration – internal audit

Actual	
2010 R	2009 R
5,960,000	4,815,000
22,000	8,000
52,218,581	44,945,511
391,950	356,603
2,481,934	966,039
<b>61,074,465</b>	<b>51,091,153</b>
3,865,000	6,151,000
<b>3,865,000</b>	<b>6,151,000</b>
36,051	30,590
1,253,147	997,263
3,149,806	3,186,427
117,749	115,703
426,440	228,060
124,845	128,182
283,393	223,854
104,009	132,176
243,770	375,875
183,444	173,393
124,323	40,975
14,783	14,258
1,401,981	1,153,589
123,702	237,518
<b>7,587,443</b>	<b>7,037,863</b>
723,397	455,117
386,656	229,787
<b>1,110,053</b>	<b>684,904</b>



Budget		Actual	
2010 R	2009 R	2010 R	2009 R
<b>13. Operating expenses</b>			
180,000	101,475	154,508	123,694
115,720	105,200	54,479	77,603
360,000	360,000	84,407	508,663
556,000	377,500	438,249	220,758
657,900	790,000	748,859	851,877
743,877	590,303	1,062,979	597,704
610,000	442,000	523,742	533,009
650,000	490,000	378,431	794,125
-	360,000	-	-
243,000	240,000	235,301	189,549
3,175,000	3,600,000	4,802,735	3,146,499
667,500	460,000	542,166	424,765
166,000	-	103,161	-
330,000	1,150,000	204,253	416,830
72,500	630,000	41,310	192,666
658,000	420,000	549,504	443,046
66,000	41,000	23,872	34,662
550,000	418,000	378,969	398,991
9,801,497	10,575,478	10,326,925	8,954,441
<b>14. Staff costs</b>			
987,540	906,000	927,084	815,991
192,000	164,000	201,901	168,623
840,000	400,000	789,518	718,937
43,879,210	38,840,337	38,938,609	36,053,308
200,000	75,000	28,075	173,947
1,876,738	1,205,793	1,206,256	992,734
292,000	62,000	309,216	68,870
48,267,488	41,653,130	42,400,659	38,992,410
		78	77
		Total number of employees	

## 15. Reconciliation between net surplus and cash applied to activities

Notes	Actual	
	2010 R	2009 R
Operating surplus/(deficit)	2,762,501	1,128,027
Adjusted for:		
Amortisation	1,162,353	1,208,105
Depreciation	1,246,901	1,303,304
Interest received	(1,659,465)	(2,145,788)
Interest paid	-	97,628
Gain/(loss) on disposal of assets	2,095	18,741
Operating surplus/(deficit) before working capital	3,514,385	1,610,017
Decrease/(increase) in accounts receivable	(1,231,290)	(159,526)
(Decrease)/increase in accounts payable	(1,652,679)	849,190
(Decrease)/increase in accounts provisions	(515,496)	789,373
Cash flows from operating activities	114,920	3,089,054

## 16. Related parties

### Executive Authority

The Executive Authority as defined in section 1 of the Public Finance Management Act is the Minister of Health, as the CMS falls under the portfolio of the National Department of Health.

### Accounting Authority

Council as defined in section 49 of the Public Finance Management Act is the controlling body of the CMS. Council members, who are appointed by the Minister of Health, control the financial and operating activities of the CMS.

### Executive management

Council members appoint the executive management team which is responsible for executing their decisions.

The emolument paid to Council members and the executive management team is shown below:

Notes	Actual	
	2010 R	2009 R
<b>16.1 Council members</b>		
<b>Fees for services</b>		
Bailey T	13,995	7,290
Bolani TA	3,960	4,351
Fortune T	41,441	23,391
Gwagwa T	7,785	6,120
Hoosain AK	14,749	4,050
Njongwe PZ	5,580	23,550
Palane LA	13,860	10,710
Pick VV	36,326	31,402
Rothberg AD	27,171	20,088
Rusconi RD	6,975	4,410
Simelane RV	8,010	8,295
	<b>179,852</b>	<b>143,657</b>
<b>16.2 Executive management</b>		
Basic salary	5,697,453	4,534,260
Bonuses	465,971	825,266
Expense allowances	121,500	370,000
	<b>6,284,924</b>	<b>5,729,526</b>

## 17. Operating lease commitments

### 17.1 Office rental

The CMS has an operating lease for rental of the office up to 31 May 2010. The rental escalates by 7.0% compounded every year.

Not later than one year  
Later than one year and not later than five years

### 17.2 Photocopiers

The CMS has an operating lease contract for the rental of copiers. The contract is for the colour photocopiers and seven black-and-white copiers. This contract expires in 2011 with rental payments based on prime plus 0.0% escalation.

Not later than one year  
Later than one year and not later than five years

## 18. Change in accounting policy

As IFRS 20, *Accounting for government grants*, are in conflict with GRAP 23, *Revenue from non-exchange transactions*, early adoption of GRAP 23 was applied in 2010. This constitutes a change in accounting policy with respect to the treatment of government grants. This change in accounting policy has been accounted for retrospectively. The comparative statements for 2009 have been restated to conform to the changed policy. The effect of the change is:

Decrease in revenue from non-exchange transaction  
Increase in opening surplus – transactions before 2009

## 19. Prior year adjustment

Depreciation and amortisation were previously calculated on a monthly basis. The depreciation and amortisation calculation was changed to be instead on a daily basis. Comparative amounts have been restated accordingly. (Also refer to notes 3 and 4.) The effect of the prior year adjustment on the financial statements is disclosed below:

(Decrease) in accumulated depreciation  
(Decrease) in accumulated amortisation  
Increase in net surplus for the year

Notes	Actual	
	2010 R	2009 R
	514,263	3,085,580
	-	514,263
	<b>514,263</b>	<b>3,599,843</b>
	240,338	240,338
	-	240,338
	<b>240,338</b>	<b>480,676</b>
	(5,271,748)	(3,017,584)
	-	6,673,111
	-	(43,356)
	-	(39,003)
	-	82,359

## 20. Contingent liability

At 31 March 2010, the CMS had a contingent liability arising from a legal claim by a former employee for unfair dismissal. Based on the legal opinion received, the estimated legal claim amounts to R579 593.

## 21. Going concern

The financial position of the CMS is such that the Accounting Authority is of the view that its operations will continue for as long as its mandate remains.

## 22. Taxation

No provision for taxation is made because the CMS is exempt from income tax in terms of section 10(1)(cA) of the Income Tax Act (Act 58 of 1962).

## 23. Critical accounting estimates and judgements

The CMS makes estimates and assumptions that affect the reported amounts. Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. Areas which management believe require the most critical estimates and judgements are:

### Useful economic lives of property, plant, and equipment

The CMS estimates the useful lives of property, plant, and equipment based on the period over which the assets are expected to be available for use. The estimated useful lives of property, plant, and equipment are reviewed periodically and are updated if expectations differ from previous estimates due to physical wear and tear, technical or commercial obsolescence, and legal or other limits on the use of the relevant assets. In addition, the estimation of the useful lives of property, plant, and equipment is based on internal evaluation and experience with similar assets. It is possible, however, that future results of operations could be materially affected by changes in the estimates brought about by changes in the factors mentioned above. The amounts and timing of recorded expenses for any period would be affected by changes in these factors and circumstances. A reduction in the estimated useful lives of property, plant, and equipment would increase the recorded expenses and decrease the non-current assets.





A decade of **nurturing**



“He who **nurtures** benevolence for all creatures within his heart overcomes all difficulties and will be the recipient of all types of riches at every step.”

### Chanakya

Indian politician,  
strategist and writer (350-275 BC)

We are pleased to present our report to the Accounting Authority of the Council for Medical Schemes (CMS) for the financial year ended 31 March 2010.

## Audit & Risk Committee members and attendance

The Audit & Risk Committee is composed of three independent non-Council members and two members of Council.

The terms of office of the three independent non-Council members expired on 31 October 2009 and three new independent non-Council members were appointed to the Audit & Risk Committee with effect from 1 October 2009.

The changes to the membership of the Audit & Risk Committee during the year were as follows:

Mr Ronald Moyo – Chairperson	Term ended on 31 October 2009
Mr Alex Hill – independent member	Term ended on 31 October 2009
Ms Gando Matyumza – independent member	Term ended on 31 October 2009
Mr Kariem Hoosain – Council member	Appointed on 28 May 2009
Mr Charles Mazhindu – Chairperson	Appointed on 1 October 2009
Mr Rowan Nicholls – independent member	Appointed on 1 October 2009
Ms Josephine Naicker – independent member	Appointed on 1 October 2009

A handover process took place during the Audit & Risk Committee meeting on 23 October 2009 where both the outgoing and incoming Committee members were present.

The membership of the Audit & Risk Committee at 31 March 2010 was as follows:

Mr Charles Mazhindu – Chairperson
Mr Rowan Nicholls – independent member
Ms Josephine Naicker – independent member
Dr Zola Njongwe – Council member
Mr Kariem Hoosain – Council member

### Meetings

The Audit & Risk Committee held five scheduled meetings during the year under review: on 22 May 2009, 24 July 2009 (a special meeting on the recommendation of audited Annual Financial Statements), 23 October 2009, 12 February 2010, and 19 March 2010. Attendance at these meetings was as follows:



Name of member	Role	Date of appointment	Number of meetings attended	
			Scheduled	Attended
Mr Charles Mazhindu	Chairperson	1 October 2009	5	3
Mr Rowan Nicholls	Independent member	1 October 2009	5	3
Ms Josephine Naicker	Independent member	1 October 2009	5	2
Dr Zola Njongwe	Council member	7 March 2008	5	4
Mr Kariem Hoosain	Council member	28 May 2009	5	3
Mr Ronald Moyo	Chairperson	Term ended 31 October 2009	5	3
Mr Alex Hill	Independent member	Term ended 31 October 2009	5	3
Ms Gando Matyumza	Independent member	Term ended 31 October 2009	5	3

Other invitees

The internal and external auditors attended all the meetings of the Audit & Risk Committee in their respective capacities as CMS auditors. The Chief Executive, Chief Financial Officer, Deputy Chief Financial Officer, and relevant senior managers attended meetings by invitation.

Audit & Risk Committee responsibility

Mandate

The mandate of the Audit & Risk Committee is derived from section 38(1)(a) of the Public Finance Management Act (PFMA) and paragraph 3.1 of Treasury Regulations.

The Audit & Risk Committee reports that it has discharged its responsibilities arising from section 38(1)(a) of the PFMA and Treasury Regulation 3.1.13.

The Audit & Risk Committee further reports that it has adopted appropriate formal terms of reference, authorised by Council, as its Audit & Risk Committee Charter; that it has regulated its affairs in compliance with this Charter, and that it has discharged all its responsibilities as contained therein. The Charter is reviewed annually as required by the PFMA.

Functions

- The functions discharged by the Audit & Risk Committee, in accordance with its Charter, included the following:
- Evaluation of the effectiveness of risk management, controls, and governance processes
  - Review of:
    - provisional and year-end financial statements to ensure that they are fairly presented and prepared in the manner required by the PFMA and the Medical Schemes Act
    - the external audit plan, budget, and reports on the Annual Financial Statements
    - the internal audit charter, annual audit plan, three-year audit plan, and budget
    - the internal audit and risk management reports and, where relevant, recommendations being made to the board

- Approval of:
  - the internal audit charter, budget, and audit plan
  - the audit fees and engagement terms of the internal auditor
  - recommendation of the unaudited and audited Annual Financial Statements to Council for the year ended 31 March 2010

Role of Audit & Risk Committee on CMS governance

The Audit & Risk Committee continues to discharge its mandate as part of the governance structures of the CMS and has, amongst others, enhanced its oversight function as follows:

Internal audit services

Outsourced Risk and Compliance Assessment (ORCA) withdrew as CMS internal audit service providers on 20 May 2009 as a result of a dispute related to ORCA's delivery. This matter remains unresolved and has been referred to relevant professional bodies by the CMS.

Subsequent to their offer to withdraw, the CMS terminated the contract with ORCA and appointed Sizwe Ntsaluba VSP as a replacement internal audit service provider on 1 October 2009. The CMS was therefore without internal audit service providers from 20 May 2009 to 30 September 2009.

Three-year rolling strategic internal audit plan

Sizwe Ntsaluba VSP compiled and presented its three-year rolling strategic plan for the review and approval by the Audit & Risk Committee. The plan was approved by the CMS on 21 May 2010.

The Audit & Risk Committee was satisfied that the plan is in line with regulations and risk-based as required by the standards, and approved the plan for the three years ending 31 March 2012.

The withdrawal of ORCA as internal auditor during the year under review as well as the late appointment of Sizwe Ntsaluba VSP as replacement auditor had the effect that Sizwe Ntsaluba VSP's strategic plan was not approved in time for the completion of its annual programme requirement in terms of the approved plan. The internal audit function was therefore ineffective as a basis on which the Committee could conclude on the adequacy of the control environment beyond the financial controls reported on by the external auditor, which reports predominantly on financial controls.

The Audit & Risk Committee has, however, satisfied itself regarding the objectivity and independence of the CMS internal audit function and the continued appropriateness of both the Audit & Risk Committee Charter and the internal audit charter.



External audit plan by the Auditor-General

The Audit & Risk Committee reviewed and approved the audit plan for the year under review as prepared and presented by the Auditor-General in terms of the Public Audit Act for the year ended 31 March 2010. The Audit & Risk Committee confirms that this plan is in line with regulations and standards, and that the plan takes into consideration the CMS risk register for the year under review. The Audit & Risk Committee believes that the plan and audit fee presented are adequate for completion of the CMS annual audit.

Risk management and internal controls

The Audit & Risk Committee continues to ensure that the CMS risk management practices and internal policies and procedures are effective and adequate to safeguard the CMS resources and promote the achievement of its mission. The Audit & Risk Committee has continued to contribute to the establishment of effective internal controls, which requires a periodic identification and assessment of risks faced by the CMS, from both internal and external sources. The Audit & Risk Committee is satisfied that areas of improvement within the CMS risk management and internal control practices are being adequately identified and entity-wide risk management within the CMS has now been formalised. The Audit & Risk Committee appreciates that an effective internal audit function is central to the proper operation of the Audit & Risk Committee.

The Audit & Risk Committee recommends that the Council review and approve the risk register and derive its own top strategic risks together with an action plan to mitigate the top strategic risks that would have been identified and approved by Council. The Audit & Risk Committee has recommended to Council that it identify the role of combined assurance providers on their top strategic risks together with the reporting requirements to provide comfort to Council on the effectiveness of CMS risk management frameworks, and also recommends the CMS risk register as prepared by management for adoption by Council.

Reviewing legal cases

The Audit & Risk Committee reviewed legal cases against the CMS that were pending at the financial year-end so as to assess the adequate disclosure required in terms of SAGRAP and Treasury Regulations. This Committee found no significant cases that warrant any mention in this report.

Evaluating financial statements

The Audit & Risk Committee has reviewed and discussed with both management and the Auditor-General the impact on the CMS Annual Financial Statements of compliance with new accounting and financial reporting pronouncements for the year under review.

The Audit & Risk Committee is satisfied that the CMS Annual Financial Statements have been prepared in line with the relevant accounting standards and financial reporting framework.

The Audit & Risk Committee has reviewed and discussed the Annual Financial Statements to be included in this Annual Report with the Auditor-General and Accounting Officer. The Audit & Risk Committee has reviewed the report of the Auditor-General and concurs with the report.

In our opinion the Annual Financial Statements fairly reflect the business outcomes of the reporting year and we have recommended them to Council for formal adoption and sign-off.

Evaluating the Audit & Risk Committee

The Audit & Risk Committee is required to have its adequacy and effectiveness evaluated annually. During the year under review, the Committee was independently evaluated by the Auditor-General as part of their annual audit of the CMS. The results of this evaluation were reported to Council and where applicable have been included in audit findings for follow-up towards positive change.

Our commitment

The Audit & Risk Committee remains committed to working together with the Executive Council and all stakeholders to promote sound corporate governance and to strengthen both risk management practices and internal control procedures at the CMS.

Chairperson of the Audit & Risk Committee  
26 July 2010

- Members of the Audit & Risk Committee**
- Mr Charles Mazhindu – Chairperson, independent and non-executive
  - Mr Rowan Nicholls – independent and non-executive
  - Ms Josephine Naicker – independent and non-executive
  - Dr Zola Njongwe – non-executive and Council member
  - Mr Kariem Hoosain – non-executive and Council member





A decade of **supporting**



“The probability that we may fail in the struggle ought not to deter us from the **support** of a cause we believe to be just.”

**Abraham Lincoln**  
16th US President

## Number of medical schemes

South Africa had 110 registered medical schemes as at December 2009 compared to 119 in 2008; 33 were open schemes and 77 were restricted schemes. A significant decline occurred in the number of both open and restricted medical schemes, of 12.1% and 6.5% respectively, translating to an overall decline of 7.6% in the total number of medical schemes.

There were 188 registered benefit options in the open schemes environment as at December 2009, compared to 200 in 2008; this is a decrease of 6.4%. In restricted schemes, there were 160 benefit options in 2009 compared to 172 in 2008; this represents a decrease of 7.5%. The average number of benefit options in open schemes was 5.7 (5.4 in 2008); that in restricted schemes remained unchanged at 2.1. Overall the average number of options increased to 3.2 in 2009 from 3.1 in 2008.

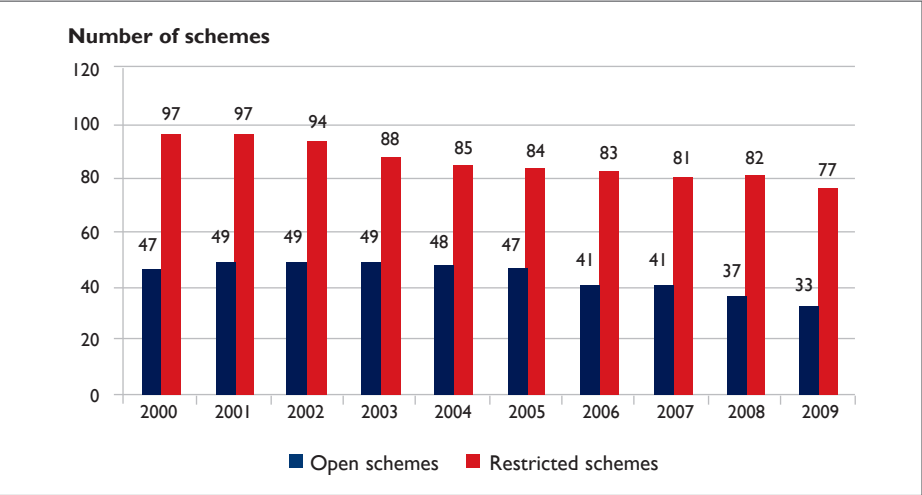
**Table 6: Number of schemes by size and type as at December 2009**

Size of scheme	Type of scheme	2008	2009
Large schemes (≥ 30 000 beneficiaries)	Open	20	20
	Restricted	17	17
	Consolidated	37	37
Medium schemes (≥ 6 000 members but < 30 000 beneficiaries)	Open	8	8
	Restricted	17	19
	Consolidated	25	27
Small schemes (< 6 000 members)	Open	9	5
	Restricted	48	41
	Consolidated	57	46
<b>Total</b>	<b>Open</b>	<b>37</b>	<b>33</b>
	<b>Restricted</b>	<b>82</b>	<b>77</b>
	<b>Consolidated</b>	<b>119</b>	<b>110</b>

### Trend in the number of schemes

Figure 11 depicts the trend in the number of registered medical schemes from 2000 to 2009. There were 144 schemes in 2000 and 110 in 2009. The number of open schemes decreased by 29.8% from 47 in 2000 to 33 in 2009; the restricted schemes environment experienced a drop as well, from 97 schemes in 2000 to 77 in 2009, translating to a 20.6% decrease. Overall, a downward trend in the number of registered schemes was seen during the 10-year period. This is explained to a large extent by consolidation that has taken place in the market through liquidations and mergers.

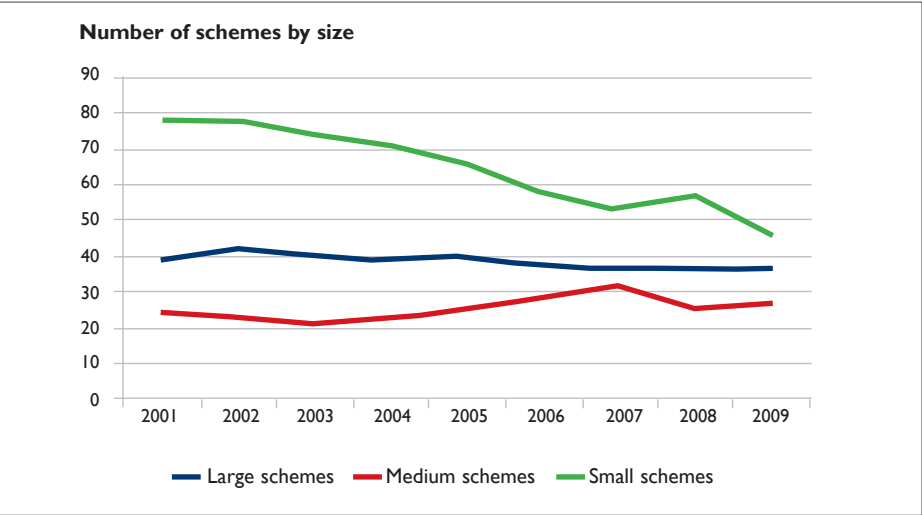
Figure 11:Trend in number of schemes 2000-2009



Trend in the number of schemes by size

Figure 12 depicts the trend in the number of registered medical schemes by size from 2001 to 2009. The Figure suggests that, between 2001 and 2007, medium and small schemes had opposing trends; a downward trend is noted in small schemes and an upward trend is noted in medium schemes over the period. Large schemes maintained a somewhat constant trend throughout this period. The Figure suggests that consolidation occurred between small, medium, and large schemes.

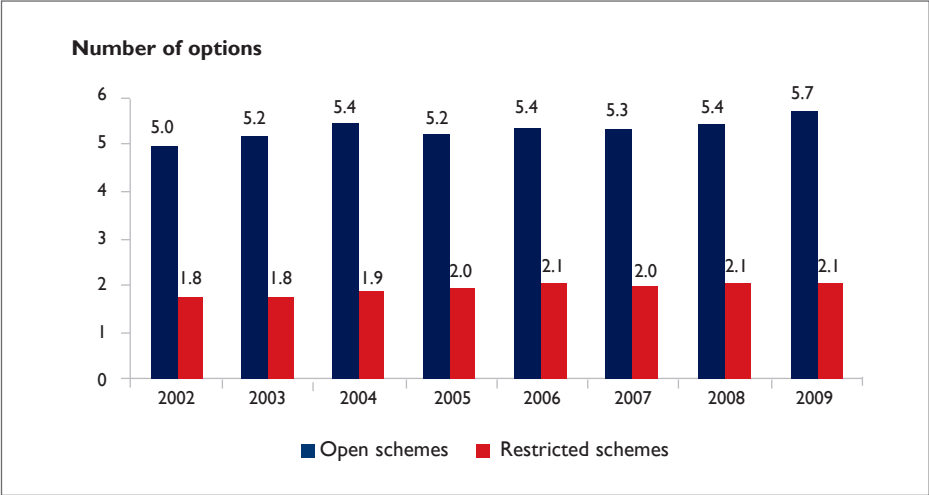
Figure 12:Trend in number of schemes by size 2001-2009



Trend in the number of options

In contrast to the decrease in the number of registered medical schemes, the average number of benefit options in open schemes increased from 5.0 in 2002 to 5.7 in 2009, as illustrated in Figure 13. The number of options in restricted schemes increased as well, from an average of 1.8 in 2002 to 2.1 in 2009. Overall, the average number of benefit options in medical schemes had an upward trend from 2.9 in 2002 to 3.2 benefit options per scheme in 2009.

Figure 13:Trend in number of options 2002-2009



Membership of medical schemes

In 2009, the number of principal members increased by 2.9% to 3 488 009. The number of dependants rose by 2.1% to 4 580 496. This means that the number of beneficiaries increased by 2.5% to 8 068 505.

Open schemes registered a 0.3% increase in the number of principal members while the number of principal members in restricted schemes rose by 7.4%. (See Table 7.)

The coverage of beneficiaries in open schemes declined by 1.5% but there was an increase of 9.0% in restricted schemes.

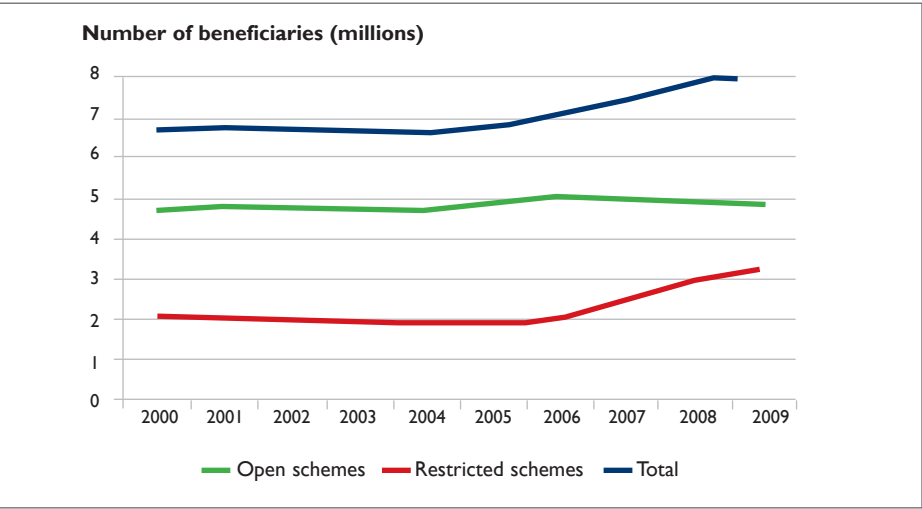
Table 7: Distribution of beneficiaries in schemes

Type of scheme		2008	2009	% change
Open	Members	2,136,960	2,144,369	0.3
	Dependants	2,751,946	2,670,965	-2.9
	Beneficiaries	4,888,906	4,815,334	-1.5
Restricted	Members	1,251,622	1,343,640	7.4
	Dependants	1,734,298	1,909,531	10.1
	Beneficiaries	2,985,920	3,253,171	9.0
Total (all schemes)	Members	3,388,582	3,488,009	2.9
	Dependants	4,486,244	4,580,496	2.1
	Beneficiaries	7,874,826	8,068,505	2.5

Trend in the number of beneficiaries

Figure 14 depicts the trend in coverage from 2000 to 2009. The number of beneficiaries in registered medical schemes increased to 8.1 million in 2009 from 6.7 million in 2000; this is an increase of 20.9%. There were 4.7 million beneficiaries in open schemes in 2000 and 4.8 million in 2009; there were 2.1 million beneficiaries in restricted schemes in 2000 and 3.3 million in 2009. This translates into an increase of 2.1% and 57.1% respectively over the 10-year period.

Figure 14: Trend in number of beneficiaries 2000-2009



Age and gender distribution of beneficiaries

Figure 15 shows the age distribution of beneficiaries for 2008 and 2009. A bimodal distribution was evident. Increases in the number of beneficiaries were seen in age bands 1-4 until 25-29 as well as 45-49 until 85+ but a decline was observed in the number of beneficiaries in age bands <1 and from 30-34 until 40-44. The average age of beneficiaries in 2009 was 31.6, marginally older than the 31.5 reported in 2008.

Figure 15: Age distribution of beneficiaries

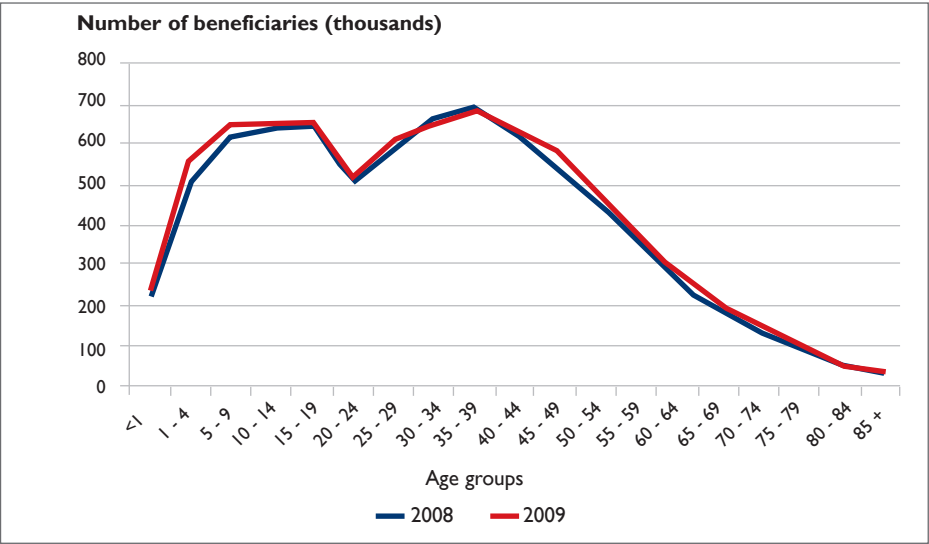
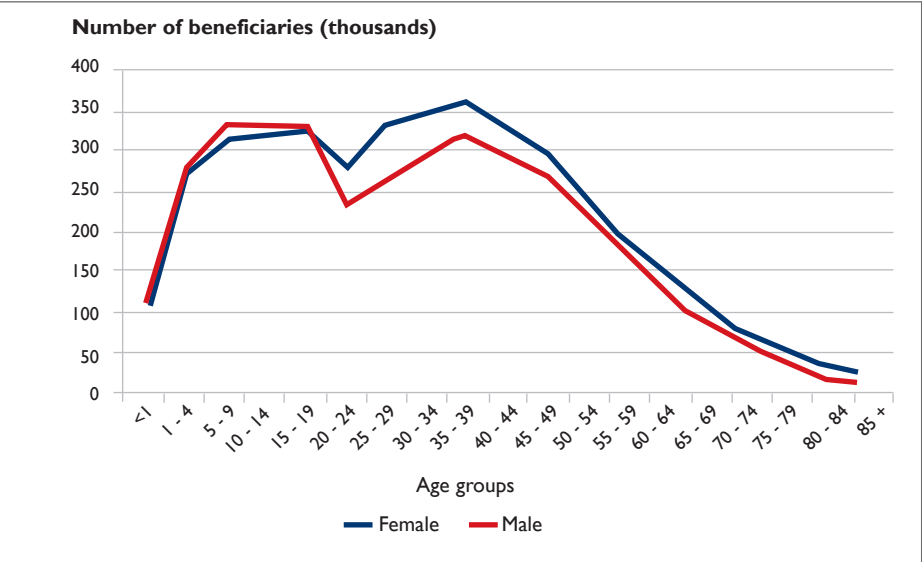


Figure 16 shows the distribution of beneficiaries by gender. There were more men in the under-19 age group; there were more women aged 20 and older. As a result, the beneficiaries of medical schemes were made up of proportionately more women than men at 52.1% and 47.9% respectively. Female beneficiaries were generally older than male beneficiaries; the average age of women belonging to a scheme was 32.3 years while that of men was 30.8 years.



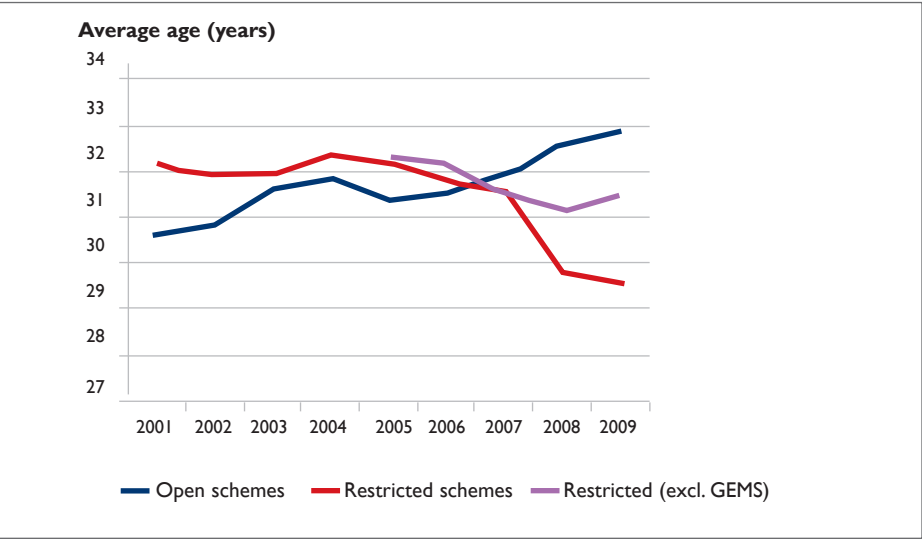
Figure 16:Age and gender distribution of beneficiaries



Trend in the age of beneficiaries

Figure 17 shows the trend in the average age of beneficiaries in open and restricted schemes from 2001 to 2009. The Figure illustrates that restricted schemes had an older profile than open schemes; this was the case until 2006. From 2007 the opposite is true: restricted schemes are now younger than open schemes. This was largely due to the introduction of the Government Employees Medical Scheme (GEMS).The impact of GEMS on the age profile of medical schemes is also reflected in the graph.

Figure 17:Trend in age of beneficiaries 2001-2009



Pensioner ratio

Table 8 indicates that the proportion of pensioners (beneficiaries 65 years old or older) increased to 6.5%. Open schemes had a higher pensioner ratio (7.3%) than restricted schemes (5.3%). There were more female (7.2%) than male (5.7%) pensioners in schemes. GEMS has had the effect of improving the overall age profile in restricted schemes; open schemes are now older.

Table 8: Pensioner ratio in schemes (%)

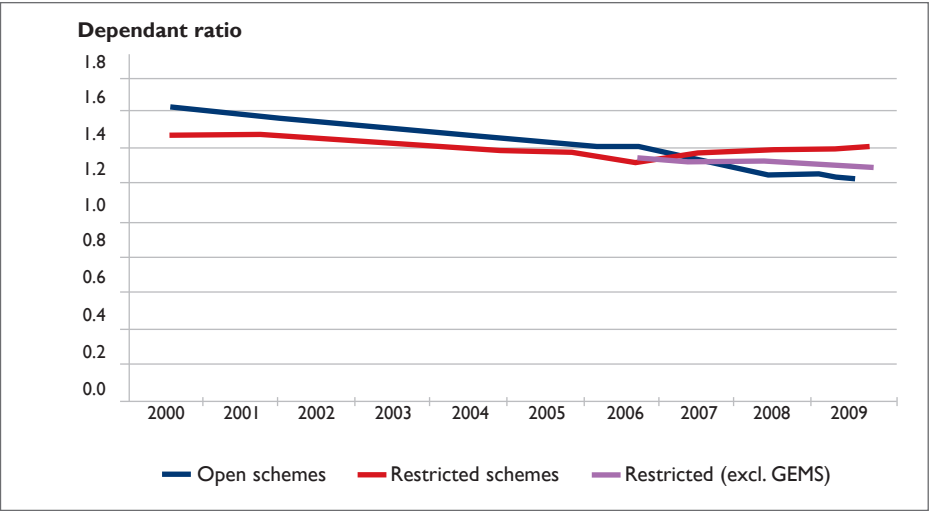
Type of scheme	Gender	2008	2009
Open	Female	7.3	8.0
	Male	6.0	6.5
	Consolidated	6.7	7.3
Restricted	Female	6.2	6.0
	Male	4.8	4.7
	Consolidated	5.5	5.3
Total	Female	6.9	7.2
	Male	5.5	5.7
	Consolidated	6.2	6.5

Dependant ratio

The dependant ratio measures the average number of dependants per principal member; it remained unchanged at 1.3 in 2009. It decreased in open schemes from the 1.3 reported in 2008 to 1.2 in 2009; the number of dependants per member in restricted schemes remained unchanged in 2009 at 1.4.

Figure 18 shows that the dependant ratio has declined steadily between 2000 and 2009. Figure 18 also illustrates that after the introduction of restricted scheme GEMS in 2006, the dependant ratio in restricted schemes started exceeding that in open schemes. The implication is that members of GEMS generally cover more dependants when compared to other schemes.

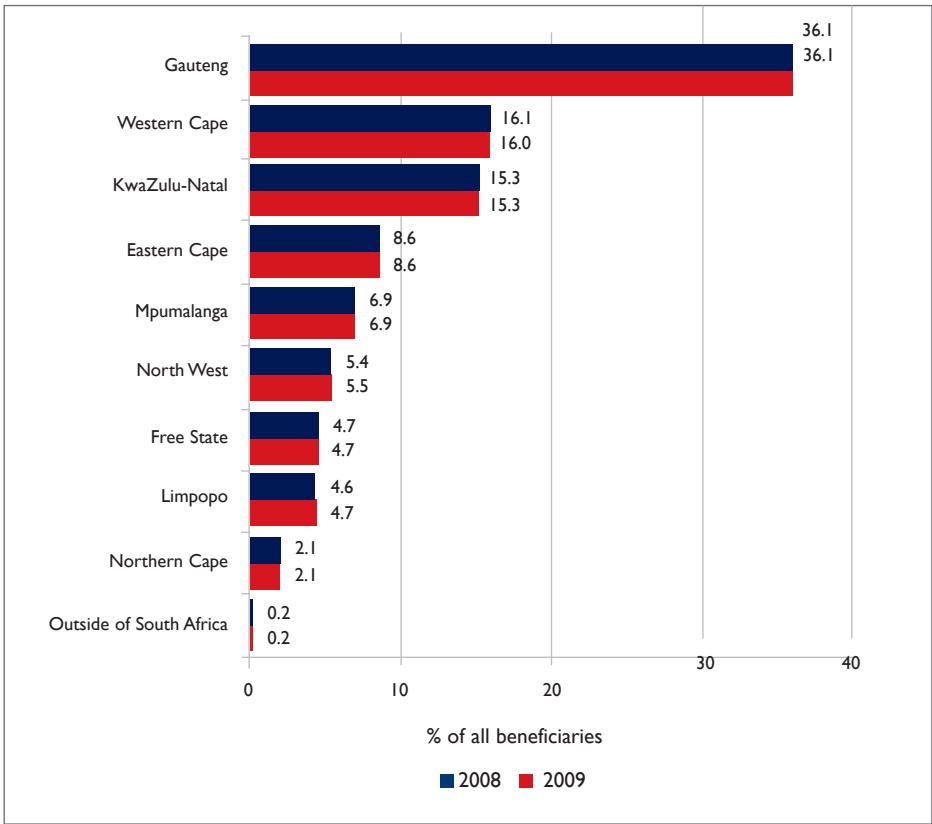
Figure 18: Dependant ratio in schemes 2000-2009



## Coverage by province

Figure 19 shows the distribution of beneficiaries by province. This data was collected primarily on the basis of the location of principal members. More than one third (36.1%) of beneficiaries were located in Gauteng; 16.0% were in the Western Cape and 15.3% in KwaZulu-Natal.

Figure 19: Distribution of beneficiaries by province (%)



## Benefits

### Total benefits paid

Medical schemes spent 18.0% more on healthcare benefits in 2009; this translates into R76.3 billion compared to R64.7 billion spent in 2008.

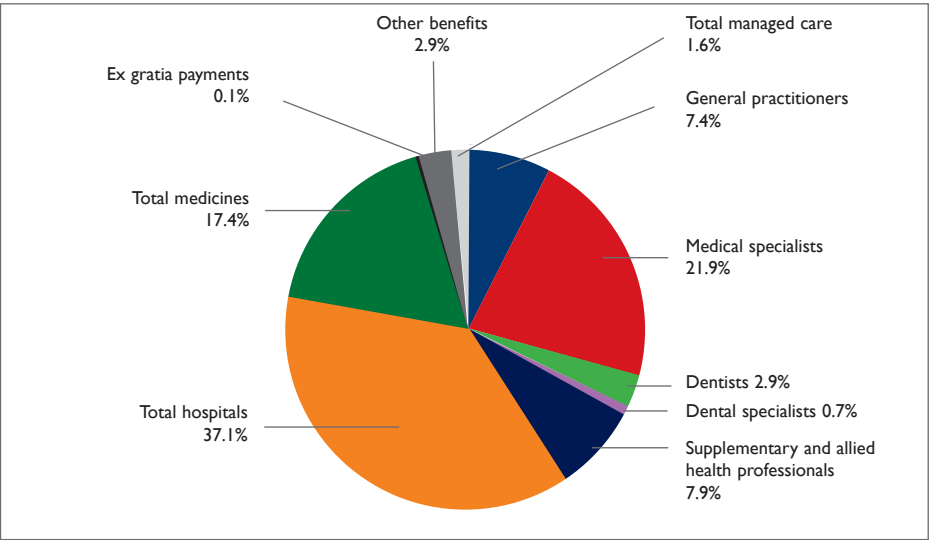
Figure 20 shows the proportions of benefits paid by schemes to the various categories of healthcare providers.

Hospital expenditure – which includes ward fees, theatre fees, consumables, medicines, and per diem arrangements – consumed R28.3 billion (37.0%) of the R76.3 billion that schemes paid to providers. Expenditure on private hospitals increased by 18.0% to R28.0 billion from R23.7 billion in 2008; expenditure on provincial hospitals increased significantly by 28.1% to R288.9 million from R225.6 million spent in 2008.

Benefits paid for medicines dispensed by pharmacists and providers other than hospitals amounted to R13.3 billion or 17.4% of total benefits paid. This reflects an increase of 18.6% when compared to the R11.2 billion spent in 2008.

Payments to medical specialists accounted for R16.7 billion or 21.9% of total benefits paid. This is an increase of 19.1% on 2008. Scheme expenditure on general practitioners (GPs) amounted to R5.7 billion or 7.4% of benefits paid, representing an increase of 8.4% from the R5.2 billion reported in 2008. Dentists accounted for R2.2 billion in expenditure, an increase of 15.8% on 2008. Expenditure on dental specialists accounted for 0.7% of benefits paid. Benefits paid to supplementary and allied health professionals amounted to R6.0 billion.

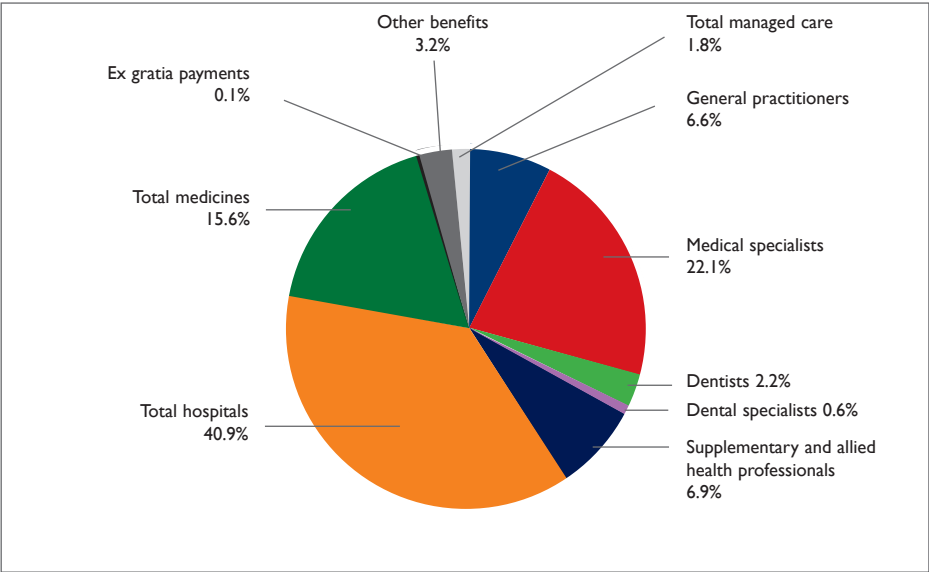
Figure 20: Healthcare benefits paid in 2009 (%)



Benefits paid from risk pool

Risk pool benefits amounted to R68.9 billion (or 90.3%) of total benefits paid in 2009; this was an increase of 18.5% on the R58.2 billion paid in 2008. Hospital expenditure accounted for 40.9% of risk benefits, just like in 2008. Expenditure on medical specialists accounted for 22.1% of risk benefits; medicines took up 15.6%. The expenditure on GPs was R4.6 billion (6.6%) of risk benefits.

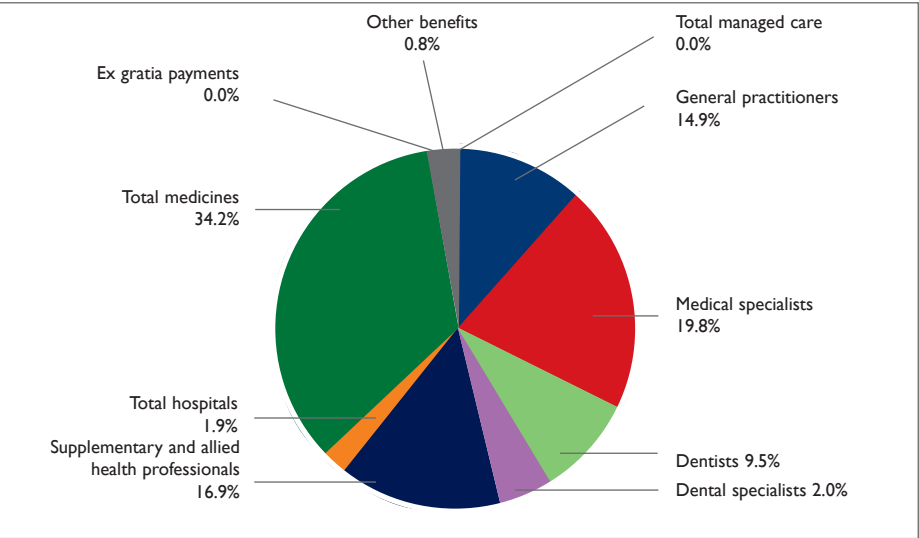
Figure 21: Healthcare benefits paid from risk pool in 2009 (%)



Benefits paid from medical savings accounts

Healthcare benefits paid from members' personal medical savings accounts made up R6.5 billion (or 9.7%) of total healthcare benefits paid. Figure 22 shows that medicines took up the largest share of savings accounts expenditure in 2009 (34.2%). Medical specialists accounted for 19.8% and GPs for 14.9%, followed by supplementary providers with 16.9%. As in previous years, expenditure on hospitals and dental specialists accounted for a comparatively small proportion of benefits paid from medical savings accounts (1.9% and 2.0% respectively).

Figure 22: Healthcare benefits paid from savings accounts in 2009 (%)



Trends in benefits paid

Figure 23 shows the distribution of benefits paid to the different types of healthcare providers since 2000. These figures have been adjusted for inflation.

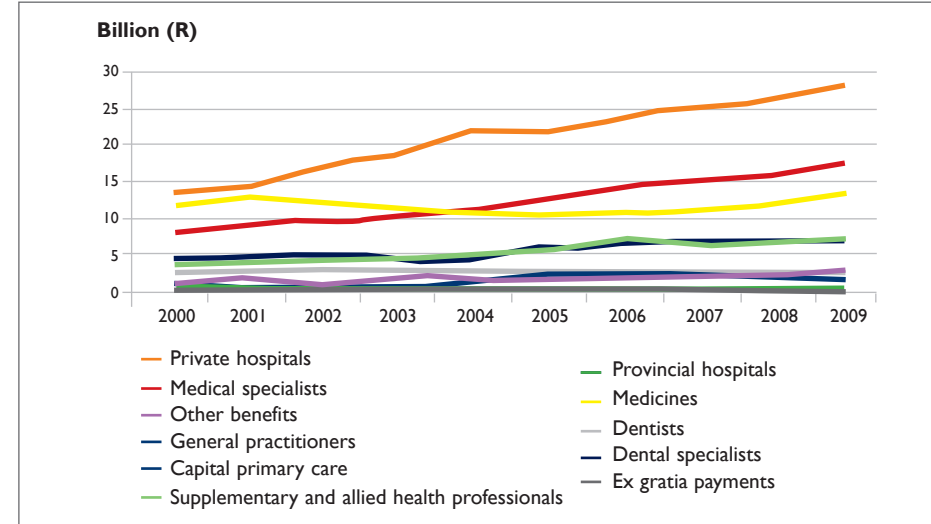
By 2009, expenditure on private hospitals had increased in real terms by 109.3% to R28.0 billion compared to R13.4 billion in 2000. Private hospital expenditure accounted for 29.9% of all benefits paid in 2000 and 28.4% of all benefits paid in 2001; then from 2002 private hospital expenditure as a proportion of all benefits paid was 31.9% and this then moved to 36.7% of all benefits paid in 2009.

Benefits paid to medical specialists in 2009 amounted to R16.7 billion, reflecting an increase of 90.0% in real terms when compared to the R8.8 billion that was spent on this item in 2000. While expenditure on medical specialists had consistently demonstrated a steady increase since 2000, a trend-break occurred in 2004, with expenditure starting to increase at a much higher rate.

Expenditure on medicines increased by 10.3%, from R12.0 billion in 2000 to R13.3 billion in 2009. As a proportion of benefits, it decreased from 27.0% in 2000 to 19.2% in 2004. In 2005-2009, medicines expenditure remained consistently at 17.0% relative to all benefits paid.

Total expenditure on GPs amounted to R5.7 billion in 2009, which is an increase of 54.0% compared with R3.7 billion in 2000. There was a 0.9% decrease on benefits paid to dentists over the 10-year period, from R2.3 billion in 2000 to R2.2 billion in 2009.

Figure 23: Healthcare benefits paid: 2009 prices\*



\* CPIX is the rebased Consumer Price Index (CPI) excluding interest rates on mortgage bonds. The values were adjusted for 2000-2009.

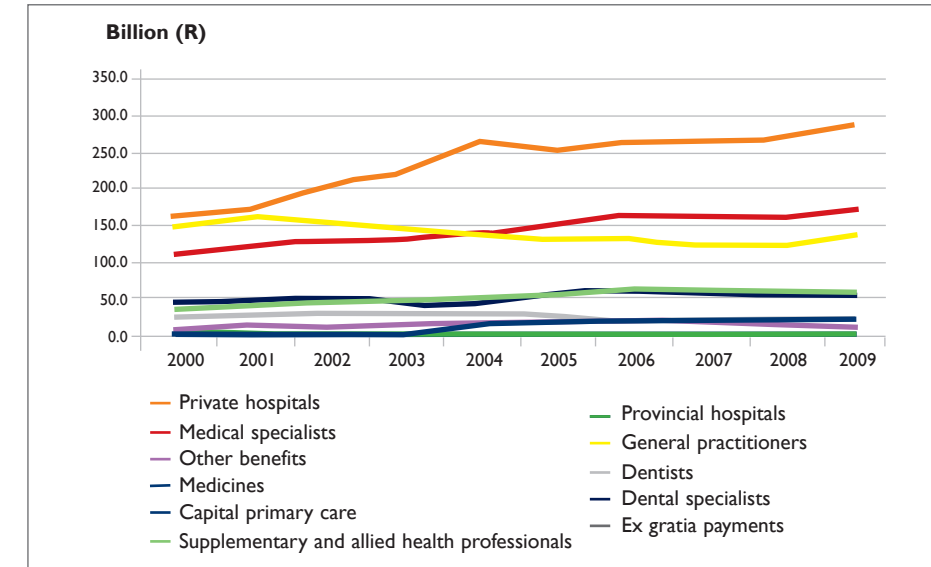
## Benefits paid per beneficiary

Figure 24 shows the changes in expenditure per beneficiary per month (pbpm) from 2000 to 2009. When adjusted for inflation and membership, expenditure on private hospitals increased by 74.6% from R165.7 pbpm in 2000 to R289.3 pbpm in 2009. An upward trend was seen from 2000 until 2004, followed by slight stabilisation between 2004 and 2005. From 2005 the trend in expenditure on private hospitals per beneficiary per month started accelerating remarkably and continues to rise steeply.

After peaking in 2001, expenditure on medicines continued to decline until 2007; it was R149.2 pbpm in 2000 and declined to R137.3 pbpm in 2009, which is a decline of 8.0%.

Per-capita expenditure on medical specialists increased by 58.5% over the 10-year period, from R108.9 pbpm in 2000 to R172.7 pbpm in 2009; that on GPs increased by 28.5%, from R45.6 pbpm in 2000 to R58.6 pbpm in 2009. Spending on dentists decreased by 17.4% from R28.1 pbpm in 2000 to R23.2 pbpm in 2009; spending on dental specialists declined by 4.0% from R5.8 pbpm in 2000 to R5.6 pbpm in 2009. Expenditure on supplementary and allied health professionals increased by 71.6% from R36.2 pbpm in 2000 to R62.1 pbpm in 2009.

Figure 24: Healthcare benefits paid per beneficiary per month: 2009 prices\*



\* CPIX is the rebased Consumer Price Index (CPI) excluding interest rates on mortgage bonds. The values were adjusted for 2000-2009.

## Utilisation of services\*

The number of beneficiaries who visited GPs and private nurses at least once in 2009 was 739.9 per 1 000 and 8.8 per 1 000 respectively; this reflects an increase of 1.0% for GP utilisation and an increase of 24.0% for private nurses utilisation. The number of beneficiaries who visited a dentist at least once in 2009 increased to 225.7 per 1 000 beneficiaries from 216.1 per 1 000 in 2008.

The number of beneficiaries admitted to private hospitals increased to 193.2 per 1 000 in 2009 from 179.4 per 1 000 beneficiaries in 2008. The number of beneficiaries admitted to public hospitals increased to 9.5 per 1 000 in 2009 from 8.6 per 1 000 beneficiaries in 2008. The number of beneficiaries admitted to both private and public hospitals for prescribed minimum benefit (PMB) conditions increased to 96.5 in 2009 (from 91.1 in 2008) per 1 000 beneficiaries and to 5.1 (from 3.8 in 2008) per 1 000 beneficiaries respectively.

\*The 2008 figures in this section have been restated.



Table 9: Utilisation of services in schemes (per 1 000 beneficiaries)

	2008 Consolidated	Open	2009 Restricted	Consolidated
<b>Private providers</b>				
No. of beneficiaries visiting a GP at least once a year	731.0	729.6	755.1	739.9
No. of beneficiaries visiting a dentist at least once a year	216.1	213.4	244.1	225.7
No. of beneficiaries visiting a private nurse least once a year	7.1	8.0	10.1	8.8
<b>Private facilities</b>				
No. of admissions*	236.0	275.2	288.1	280.4
No. of beneficiaries admitted to hospitals**	179.4	197.3	187.1	193.2
No. of beneficiaries admitted for PMBs**	91.1	101.0	89.8	96.5
<b>Public facilities</b>				
No. of admissions*	5.6	9.2	31.9	18.3
No. of beneficiaries admitted to hospitals**	8.6	5.1	16.1	9.5
No. of beneficiaries admitted for PMBs**	3.8	4.0	6.8	5.1

The 2008 figures have been restated.  
\* No. of admissions = all admissions  
\*\* No. of beneficiaries admitted = unique admissions

The utilisation of private nurse services increased between 2008 and 2009, as reflected in Table 9.

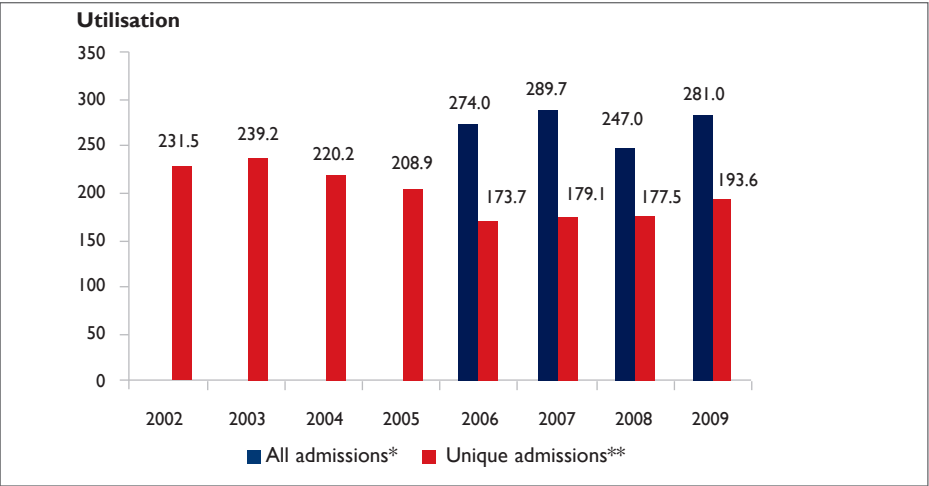
Table 10: Average utilisation of services (per beneficiary per annum)

	2008 Consolidated	Open	2009 Restricted	Consolidated
Visits to a GP	3.2	2.9	3.3	3.0
Visits to a dentist	0.5	0.4	0.5	0.5
Visits to a private nurse*	0.0	0.0	0.0	0.0

The 2008 figures have been restated.  
\*The numbers were too insignificant to be reflected.

Figure 25 depicts the utilisation of private hospitals (including day clinics) per 1 000 beneficiaries; it has consistently increased at a significant pace since 2006.

Figure 25: Utilisation of private hospitals (per 1 000 beneficiaries)



The 2008 figures have been restated.  
\* No. of admissions = all admissions  
\*\* No. of beneficiaries admitted = unique admissions

Visits to GPs and dentists

The average number of visits to a GP per beneficiary per annum increased to 3.0 in 2009. Beneficiaries in open schemes visited a GP on average 2.9 times in 2009; those in restricted schemes saw a GP on average 3.3 times per annum.

The average number of visits to a dentist remained unchanged at 0.5 per beneficiary per annum. For open and restricted schemes the numbers were the same as in 2008: 0.4 and 0.5 visits per beneficiary per annum respectively.

Length of stay in hospital

The average length of stay in private hospitals ranged between 3.8 and 4.6 days per beneficiary between 2006 and 2009. The average length of stay in provincial hospitals ranged between 2.6 and 3.1 days per beneficiary in the same period.

Table 11: Average length of stay in hospital (per beneficiary per annum)

	Year	Open	Restricted	Consolidated
Private hospital	2006	3.4 (23)	5.1 (48)	3.8 (71)
	2007	3.2 (34)	4.8 (65)	3.6 (99)
	2008	3.7 (30)	6.2 (74)	4.6 (104)
	2009	3.6 (33)	6.2 (76)	4.6 (109)
Provincial hospital	2006	2.1 (23)	3.4 (48)	2.6 (71)
	2007	1.8 (34)	3.0 (65)	2.2 (99)
	2008	1.8 (30)	4.5 (74)	3.6 (104)
	2009	1.5 (33)	3.9 (76)	3.1 (109)

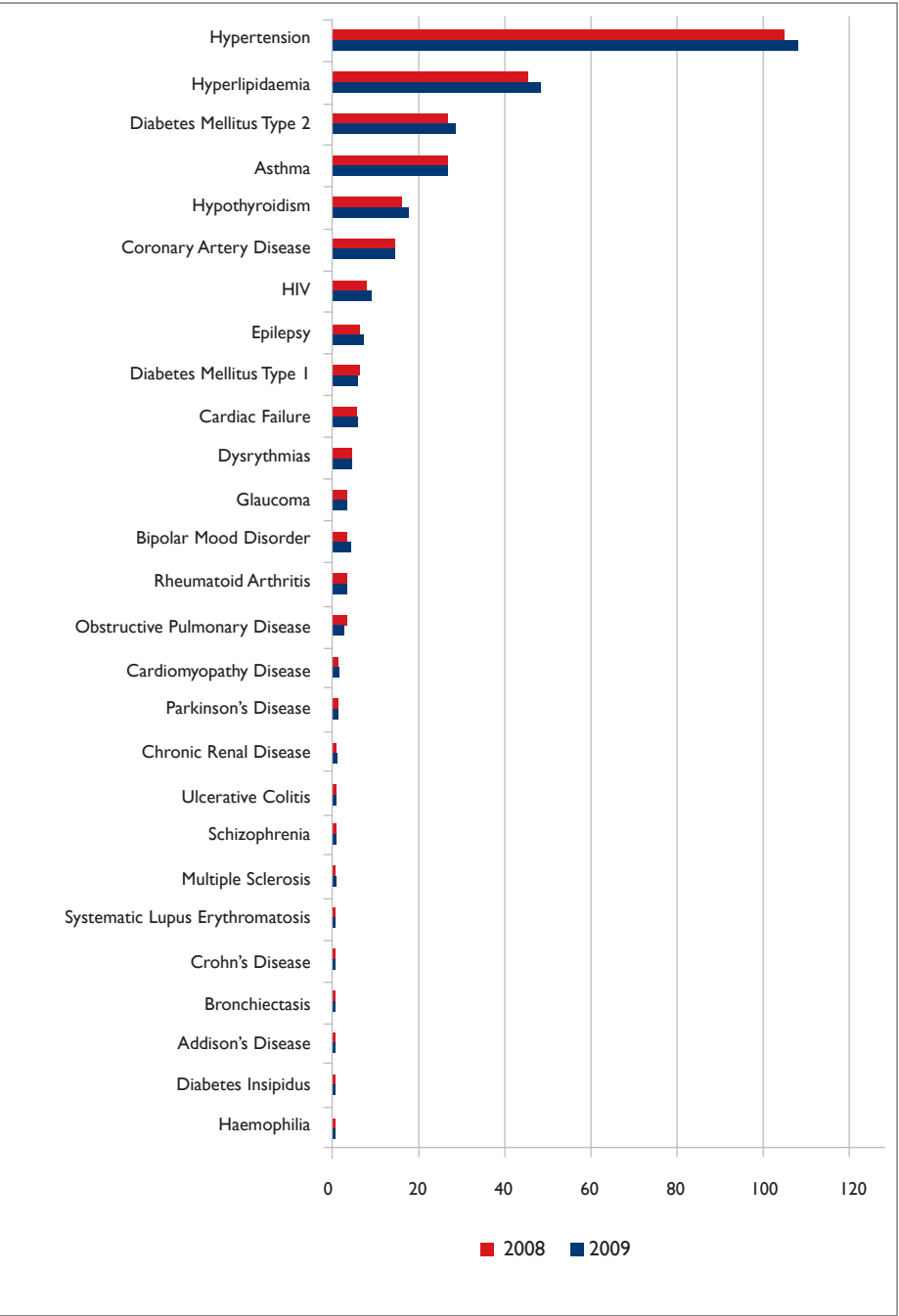
\* The numbers in brackets represent the number of schemes to which the data applies.

## Burden of disease

Figure 26 shows the prevalence of chronic conditions which must be covered in all benefit options. Schemes that did not submit data on chronic conditions were excluded from the analysis. And despite all the difficulties with the quality of data submitted by medical schemes, the Office took every care to ensure that the data is complete and accurate.

For 2009, the data represented 97.3% of schemes (95.0% in 2008) and 99.5% (99.7% in 2008) of beneficiaries. The analysis of 2009 showed that the most prevalent chronic condition in medical schemes is hypertension at 107.9 cases per 1 000 beneficiaries (105.6 in 2008), followed by hyperlipidaemia at 48.5 (45.6 in 2008), Diabetes Mellitus Type 2 at 28.9 (26.9 in 2008), and asthma at 26.8 (26.6 in 2008). The prevalence of chronic conditions was higher in open schemes.

Figure 26: Prevalence of chronic conditions in schemes (per 1 000 beneficiaries)



# Contributions, relevant healthcare expenditure, and trends

Scheme contributions increased by 14.5% to R84.9 billion as at December 2009 from R74.1 billion in December 2008. Total gross relevant healthcare expenditure incurred by medical schemes increased by 17.6% to R76.3 billion<sup>2</sup> from R64.9 billion in 2008.

Gross contributions per average beneficiary per month (pabpm) grew by 11.1% to R890.0 from R801.0 in 2008. Total gross relevant healthcare expenditure incurred increased by 14.1% to R800.3 from R701.3 in 2008.

## Risk contributions and relevant healthcare expenditure

Risk contributions (net of medical savings accounts contributions) increased by 14.8% to R77.1 billion from R67.2 billion in 2008; the increase from 2007 to 2008 was 13.5%.The increase in risk contributions pabpm was 9.6% to R726.0 from R662.4 (2007: 8.0%).

Risk claims increased by 18.1% to R68.9 billion from R58.4 billion in 2009 (2008: 14.0%). Risk claims pabpm rose by 14.6% to R722.6 from R630.8 (2008: 10.0%).

## Medical savings accounts contributions and relevant healthcare expenditure

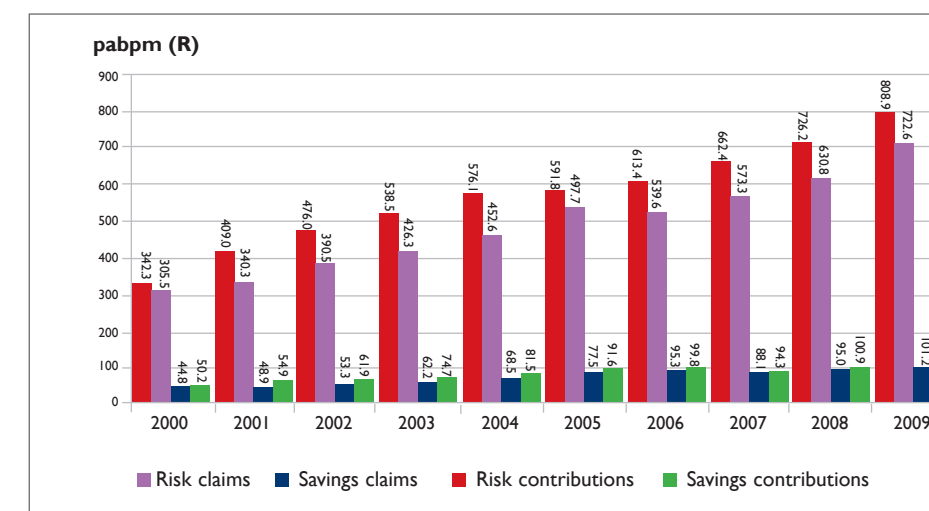
Contributions to medical savings accounts increased by 11.7% to R7.7 billion from R6.9 billion (2008: 9.7% increase).When measured on a pabpm basis in respect of only those schemes that had savings transactions, the increase was 4.7% – from R100.9 to R105.7 (2008: 7.0% increase).

Claims paid from medical savings accounts increased by 13.6% to R7.4 billion from R6.5 billion (2008: 10.6% increase). On a pabpm basis for schemes that had savings transactions, medical savings accounts claims increased by 6.5% to R101.2 from R95.0 (2008: 7.9% increase).

Figure 27 shows that up to 2006, medical savings accounts contributions and claims increased at greater rates than those recorded for the risk components.This indicates a move towards benefit designs that require a greater proportion of benefits to be funded out of members' personal medical savings accounts rather than from the general risk pool of their scheme.

But the lower figures in 2007-2009 appear to reflect a change in this trend.The decrease is also partly attributable to the decision of the CMS not to allow variable savings rates on an option,which resulted in a number of schemes no longer offering any savings plan accounts.

Figure 27: Risk and medical savings accounts contributions and claims pabpm



pabpm = per average beneficiary per month

## Contributions and relevant healthcare expenditure by type of scheme

Table 12, and Figures 28 and 29 show contributions and claims for open and restricted schemes pabpm.

<sup>1</sup> All references to claims and benefits indicate relevant healthcare expenditure.

<sup>2</sup> We have included the IBNR and the results of risk transfer arrangements.

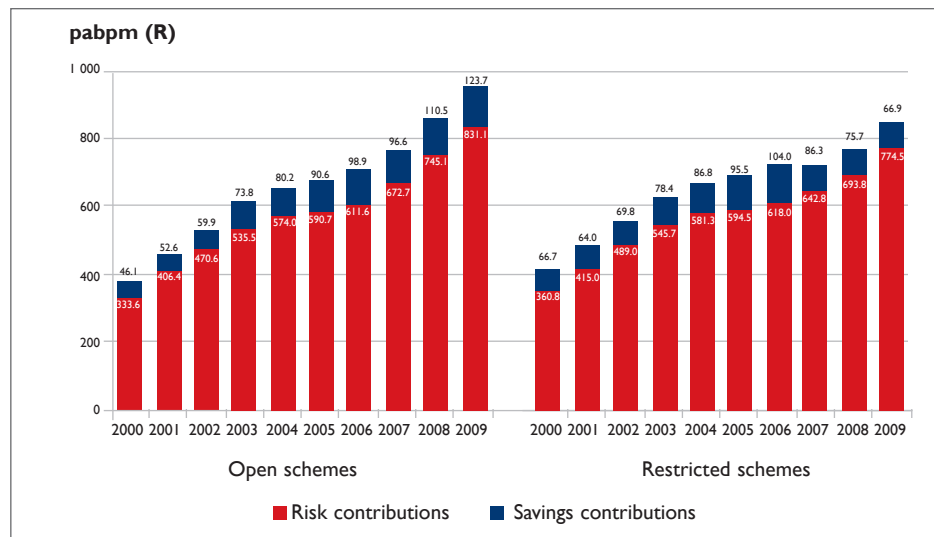
Table 12: Contributions and relevant healthcare expenditure pabpm

	Risk contributions		Savings contributions		Risk claims		Savings claims	
	pabpm R	% change	pasbpm R	% change	pabpm R	% change	pasbpm R	% change
Open schemes								
2000	333.6		46.1		292.4		41.3	
2001	406.4	21.8	52.6	13.9	331.4	13.3	46.6	12.8
2002	470.6	15.8	59.9	14.0	379.3	14.4	51.6	10.7
2003	535.5	13.8	73.8	23.2	413.9	9.1	61.0	18.2
2004	574.0	7.2	80.2	8.7	437.2	5.6	68.2	11.8
2005	590.7	2.9	90.6	13.0	484.2	10.7	77.5	13.6
2006	611.6	3.5	98.9	9.1	522.9	8.0	95.9	23.6
2007	672.7	10.0	96.6	(2.3)	562.1	7.5	91.6	(4.4)
2008	745.1	10.8	110.5	14.3	626.6	11.5	105.9	15.6
2009	831.1	11.5	123.7	11.9	719.4	14.8	119.5	12.8
Restricted schemes								
2000	360.8		66.7		333.1		58.8	
2001	415.0	15.0	64.0	(4.0)	360.9	8.3	57.9	(1.5)
2002	489.0	17.8	69.8	9.0	417.9	15.8	60.3	4.2
2003	545.7	11.6	78.4	12.3	455.9	9.1	66.6	10.5
2004	581.3	6.5	86.8	10.7	490.0	7.5	69.7	4.6
2005	594.5	2.3	95.5	10.1	531.4	8.4	77.2	10.8
2006	617.9	3.9	103.7	8.6	582.1	9.5	92.8	20.3
2007	641.8	3.9	86.3	(16.8)	595.7	2.3	75.7	(18.4)
2008	693.8	8.1	75.7	(12.3)	638.0	7.1	66.2	(12.5)
2009	774.5	11.6	66.9	(11.6)	727.5	14.0	61.8	(6.6)

pabpm = per average beneficiary per month

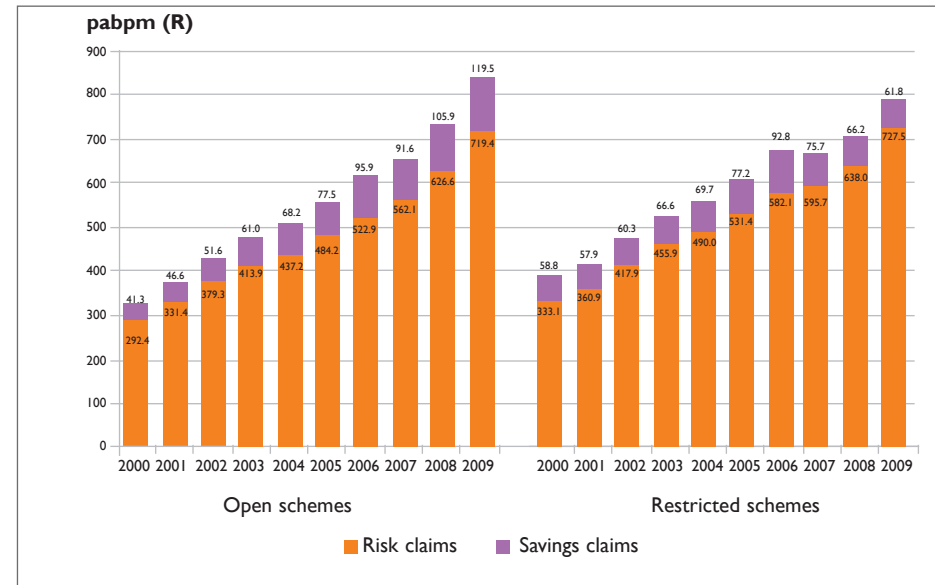
pasbpm = pabpm in respect of schemes that had savings transactions

Figure 28: Risk and savings contributions pabpm



pabpm = per average beneficiary per month

Figure 29: Risk and savings claims pabpm



pabpm = per average beneficiary per month

Increases in risk claims pabpm were slightly lower in restricted schemes than in open schemes. In 2008, restricted schemes experienced decreases in claims from members' medical savings accounts while open schemes incurred an increase. The claims ratio in open schemes increased to 86.6% in 2009 from 84.1% in 2008; in restricted schemes it increased to 93.9% from 92.0%.

Table 13: Contributions and relevant healthcare expenditure pabpm: 2009 prices

	Risk contributions		Savings contributions		Risk claims		Savings claims	
	pabpm R	% change	pasbpm R	% change	pabpm R	% change	pasbpm R	% change
All schemes								
2000	586.6		86.0		523.6		76.7	
2001	662.6	13.0	88.9	3.4	551.4	5.3	79.2	3.3
2002	707.0	6.7	91.9	3.4	580.1	5.2	79.2	(0.1)
2003	755.9	6.9	104.9	14.2	598.3	3.1	87.2	10.2
2004	797.2	5.5	112.8	7.5	626.2	4.7	94.8	8.7
2005	792.3	(0.6)	122.6	8.7	666.2	6.4	103.7	9.4
2006	784.9	(0.9)	127.7	4.1	690.5	3.6	121.9	17.6
2007	790.9	0.8	112.6	(11.8)	684.5	(0.9)	105.2	(13.8)
2008	777.7	(1.7)	108.0	(4.1)	675.6	(1.3)	101.7	(3.3)
2009	808.9	4.0	105.7	(2.2)	722.6	7.0	101.2	(0.5)

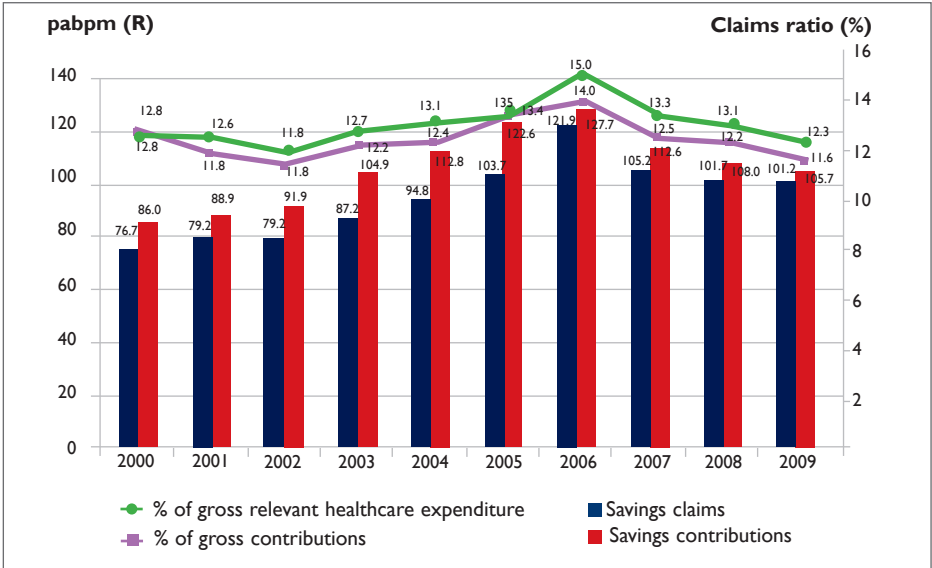
pabpm = per average beneficiary per month

pasbpm = pabpm in respect of schemes that had savings transactions



Table 13 indicates the changes in contributions and claims after adjusting for inflation. Medical schemes experienced increases in risk contributions and claims pabpm, and a noted decrease in savings contributions and claims. Even though savings contributions and claims have decreased over the last three years, it appears that the rate of decrease is slowing down.

Figure 30: Medical savings accounts contributions and claims pabpm: 2009 prices



pabpm = per average beneficiary per month

The proportion of claims paid from medical savings accounts decreased to 12.3% during the review period from 13.1% in 2008, as shown in Figure 30.

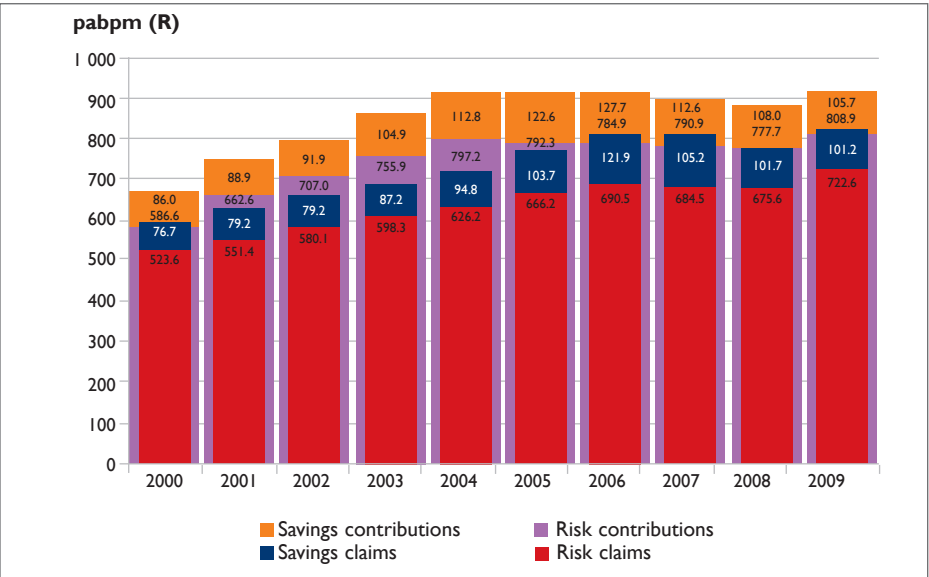
For open schemes, the proportion of claims paid from medical savings accounts decreased from 14.5% in 2008 to 14.2% in 2009; the medical savings accounts claims ratio increased to 96.6% from 95.9%.

For restricted schemes, the proportion of claims paid from medical savings accounts also decreased, from 9.4% in 2008 to 7.8% in 2009. The medical savings accounts claims ratio increased to 92.4% from 87.5%.

Contributions and relevant healthcare expenditure since 2000

Figure 31 tracks the use of medical savings accounts in the benefit designs of schemes since 2000. When adjusted for inflation, risk contributions and claims have increased by 37.9% and 38.0% respectively; medical savings accounts contributions and claims have risen by 22.9% and 32.0% respectively.

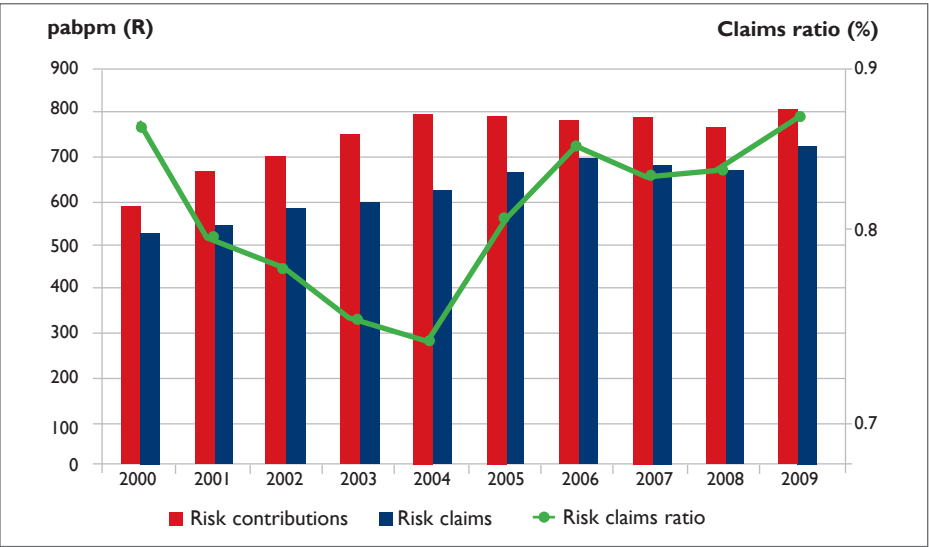
Figure 31: Risk and medical savings accounts contributions and claims pabpm: 2009 prices\*



pabpm = per average beneficiary per month  
\* The values were adjusted for CPIX for 2000-2009 (rebased factors).

Figure 32 shows the relationship between risk contributions and claims paid over the past decade, after adjusting for inflation.

Figure 32: Risk claims ratio for all schemes: 2009 prices\*



pabpm = per average beneficiary per month  
\* The values were adjusted for CPIX for 2000-2009.

After an initial decline, the claims ratio increased to 88.0% in 2006 from 84.1% in 2005, and stabilised to 86.5% in 2007 and 86.9% in 2008. It then increased further to 89.3% in 2009. This means that medical schemes paid out 89.3% of contributions in benefits.

## Risk transfer arrangements

Over the last few years, schemes have increasingly resorted to risk transfer arrangements to try and manage their insurance risks.

Table 14 reflects the main components of such arrangements:

- the capitation fees that schemes paid to third parties to manage their risks;
- the estimated costs which schemes would have incurred had they not used risk transfer arrangements; and
- the net effect thereof.

The “net income/(expense)” column reflects the value derived from the risk transfer arrangement. (Annexure T provides further details.)

**Table 14: Significant risk transfer arrangements (in R '000)**

	Capitation fees			Estimated recoveries			Net income/(expense)		
	2009	2008*	% growth	2009	2008*	% growth	2009	2008*	% growth
Open schemes	2,015,638	1,591,891	26.6	1,888,115	1,433,952	31.7	(64,113)	(143,971)	55.5
Restricted schemes	1,019,976	876,836	16.3	1,033,288	888,923	16.2	20,267	27,404	26.0
<b>All schemes</b>	<b>3,035,614</b>	<b>2,468,727</b>	<b>23.0</b>	<b>2,921,403</b>	<b>2,322,875</b>	<b>25.8</b>	<b>(43,846)</b>	<b>(116,567)</b>	<b>62.4</b>

*\*The figures for 2008 were not adjusted.*

Table 15 lists the 10 schemes which incurred the biggest losses in respect of their significant risk transfer arrangements and Table 16 details the 10 biggest loss-making benefit options.

**Table 15: Schemes with highest risk transfer arrangement losses**

Name of medical scheme	Bene- ficiaries	Capitation fees	Estimated recoveries	Profit/(loss) sharing	Net income/ (expense)	Net income/ (expense) as % of capitation fees
	As at 31.12.2009	R'000	R'000	R'000	R'000	%
Bonitas Medical Fund	650,846	732,315	645,094	-	(87,221)	-11.9
Government Employees Medical Scheme (GEMS)	1,147,897	288,566	246,885	6,251	(35,431)	-12.3
Transmed Medical Fund	144,286	128,336	98,473	-	(29,863)	-23.3
Momentum Health	180,352	143,877	31,848	-	(12,029)	-8.4
Medihelp	220,240	263,599	253,358	-	(10,241)	-3.9
Resolution Health Medical Scheme	74,212	69,761	62,910	-	(6,851)	-9.8
Oxygen Medical Scheme	133,860	61,552	52,149	3,074	(6,329)	-10.3
Chartered Accountants (SA) Medical Aid Fund (CAMAF)	41,262	12,461	7,425	-	(5,036)	-40.4
Medshield Medical Scheme	173,638	19,954	15,155	-	(4,800)	-24.1
Medicover	91,985	52,624	48,430	-	(4,194)	-8.0

*\*The figures for 2008 were not adjusted.*

**Table 16: Options with highest risk transfer arrangement losses**

Name of medical scheme	Name of benefit options	Bene- ficiaries	Average age pb	Capitation fees	Estimated recoveries	Profit/ (loss) sharing	Net income/ (expenses)	Net income/ (expenses) as % of capitation fees
		As at 31.12.2009	Years	R'000	R'000	R'000	R'000	%
Bonitas Medical Fund	Standard	177,654	31.7	487,261	403,035	-	(84,226)	-17.3
	Primary	54,791	26.7	84,302	68,496	-	(15,806)	-18.7
Government Employees Medical Scheme (GEMS)	Beryl	11,993	27.6	123,032	105,128	(350)	(18,254)	-14.8
	Sapphire	21,126	26.6	107,165	86,487	6,601	(14,077)	-13.1
Transmed Medical Fund	State Plus	6,797	33.8	35,563	18,264	-	(17,299)	-48.6
	Network	-	-	92,773	80,209	-	(12,564)	-13.5
	Ubuntu	-	-	-	-	-	-	-
Medshield Medical Scheme	MediPlus	43,263	29.6	11,236	-	-	(11,236)	-100.0
	MediBonus	11,312	35.9	6,236	-	-	(6,236)	-100.0
Medihelp Resolution Health Medical Scheme	Necesse	11,360	29.8	28,561	19,107	-	(9,454)	-33.1
	Progressive	13,682	28.9	26,741	20,209	-	(6,533)	-24.4

*pb = per beneficiary*

Bonitas Medical Fund, Government Employees Medical Scheme (GEMS), and Transmed Medical Fund are listed in both Tables 15 and 16 as the biggest loss-makers. All three have two options each in the top 10 loss-making benefit options, and Bonitas Medical Fund has three of the top 10 biggest loss-making contracts.

The R29.9 million loss experienced by Transmed Medical Scheme represents 2.3% of its total net relevant healthcare expenditure; the R87.2 million loss on Bonitas Medical Fund and the R6.9 million loss on Resolution Health Medical Scheme represent 1.5% of their total net relevant healthcare expenditure. The losses incurred by the rest of the top 10 biggest loss-making schemes were below 1.5%.

The State Plus Network benefit option on Transmed Medical Fund suffered the biggest loss in terms of the percentage of capitation fees paid (48.6%), followed by Medihelp's Necesse benefit option (33.1%) and Resolution Health Medical Scheme's Progressive benefit option (24.4%) (see Table 16).

## Non-healthcare expenditure

The non-healthcare expenditure of medical schemes consists mainly of:

- administration expenditure;
- managed healthcare: management services (fees for managing health benefits);
- commissions and service fees paid to brokers;
- other distribution costs; and
- impaired receivables.

### Administration expenditure

Administration expenditure in all medical schemes had grown by 11.2% to R7.5 billion by the end of December 2009 from R6.8 billion in 2008. Open schemes increased their administration expenditure by 8.7% to R5.6 billion from R5.1 billion in 2008. The 19.0% increase from R1.6 billion in 2008 to R2.0 billion in 2009 in restricted schemes reflects the significant increase in their membership numbers during the year under review. (GEMS alone experienced a 43.2% increase in the number of their average beneficiaries.)

Eighteen open schemes (representing 2.8 million average beneficiaries or 34.8% of all average beneficiaries) and 16 restricted schemes (representing 264 148 average beneficiaries or 3.3% of all average beneficiaries) had an overall administration expenditure greater than 10.0% of Gross Contribution Income (GCI) in 2009.

Table 17 shows “high-impact”<sup>3</sup> open schemes with administration expenditure greater than 10.0% of GCI. A high percentage is sometimes the function of a low average contribution rather than high absolute administration costs.

**Table 17: High-impact open schemes with administration expenditure above 10.0% of GCI (2009)**

Name of medical scheme	Average beneficiaries	Administration expenditure as % of GCI
Bestmed Medical Scheme	88,758	12.0
Discovery Health Medical Scheme	1,996,866	10.7
Hosmed Medical Aid Scheme	91,854	13.6
Liberty Health Medical Scheme	94,969	10.2
Resolution Health Medical Scheme	80,397	17.8
Sizwe Medical Fund	160,316	10.3

GCI = Gross Contribution Income

Table 18 shows high-impact open schemes with administration expenditure above the open schemes industry average of R95.8 pabpm. As mentioned, high percentages may be the result of low average contributions, but we are concerned that, relative to the open schemes industry average, some of these schemes have high administration costs as a percentage of GCI and on a pabpm basis.

**Table 18: High-impact open schemes with administration expenditure above the open schemes industry average of R95.8 pabpm as at December 2009**

Name of medical scheme	Average beneficiaries	Administration expenditure
		pabpm (R)
Bestmed Medical Scheme	88,758	116.6
Resolution Health Medical Scheme	80,397	114.21
Discovery Health Medical Scheme	1,996,866	106.5
Medihelp	213,386	104.7
Hosmed Medical Aid Scheme	91,854	103.4
Fedhealth Medical Scheme	189,259	99.3
Liberty Health Medical Scheme	94,969	96.5
Keyhealth	105,817	96.1

pabpm = per average beneficiary per month

Table 19 shows the gross administration fees paid to third-party administrators. These fees are the sum of administration fees, co-administration fees, and other indirect expenses.

<sup>3</sup> Refer to the section on the Risk Assessment Framework (RAF) on p. 204.

Table 19: Gross administration fees paid to third-party administrators

	Open schemes			Restricted schemes		
	pabpm 2009 R	pabpm 2008 R	% variance	pabpm 2009 R	pabpm 2008 R	% variance
Direct administration fees	79.7	73.4	8.6	42.3	39.4	7.7
Co-administration fees	0.4	5.3	(91.6)	0	2.5	0
Indirect expenses paid	0	3.7	0	0.3	0.3	(2.6)
<b>Total</b>	<b>79.7</b>	<b>74.0</b>	<b>7.7</b>	<b>42.3</b>	<b>39.3</b>	<b>7.6</b>

pabpm = per average beneficiary per month

On average, open schemes spent 88.5% more on gross administration fees than restricted schemes (2008: 88.3%).

Administration fees paid to third-party administrators were the main component of Gross Administration Expenditure (GAE); they grew by 9.0% to R5.6 billion in 2009 from R5.2 billion in the previous year. These fees represented 75.1% of GAE in 2009 (2008: 76.7%).

## Expenditure on management of benefits: managed healthcare fees

Managed healthcare management fees increased by 15.5% to R1.9 billion in 2009 from R1.7 billion in 2008. In 2009, the number of members covered by these managed healthcare interventions increased by 2.4% to 7 955 248 beneficiaries (or 98.6% of all beneficiaries).

Table 20 shows the number of benefit options with claims ratios greater than 100.0% and their expenditure on managed healthcare management fees. There were 93 options in this category, and they accounted for 12.1% of all managed healthcare management fees and 12.7% of beneficiaries in respect of whom such expenditure was incurred.

### Fees of trustees and Principal Officers

Table 20: Managed healthcare management fees in respect of options with a claims ratio above 100.0%

	Managed care costs	Gross healthcare result*	Number of beneficiaries	Number of options
	R '000	R '000		
Open schemes	80,968	(457,680)	270,666	41
Restricted schemes	148,568	(766,723)	742,091	52
<b>All schemes</b>	<b>229,535</b>	<b>(1,224,403)</b>	<b>1,012,757</b>	<b>93</b>

\* Gross healthcare result = contributions less claims

Remuneration and other considerations of trustees and Principal Officers both rated 0.7% of GAE. As in 2008, the fees of Principal Officers came to 0.6% of GAE in open schemes; they came to 1.6% in restricted schemes.

Table 21 shows the 10 schemes with the highest average fees of trustees. More details are contained in Annexure Q.

## Trends in administration and managed healthcare expenditure

Table 21: Top 10 trustee fees

Name of medical scheme	Trustee remuneration and other considerations		
	R '000	Number of trustees	Average fee per trustee (R '000)
Bonitas Medical Fund	3,978	9	442
Selfmed Medical Scheme	2,200	5	440
Liberty Health Medical Scheme	2,696	7	385
Resolution Health Medical Scheme	3,260	11	296
Medshield Medical Scheme	2,771	11	252
Fedhealth Medical Scheme	3,227	13	248
Medicover	1,937	8	242
Government Employees Medical Scheme (GEMS)	2,116	12	176
Bestmed Medical Scheme	2,318	17	136
Transmed Medical Fund	1,932	22	88

Administration expenditure was the main component of non-healthcare expenditure in 2009 at 69.4% (2008: 69.3%). Managed healthcare management fees made up 17.9% of non-healthcare expenditure (2008: 17.2%).

Administration expenditure and managed healthcare management fees effectively accounted for 11.1% of GCI in 2009 (2008: 11.4%).

Table 22 shows administration and managed healthcare expenditure by type of scheme administration.

In 2009, there were five self-administered open schemes (2008: 5) representing 479 803 average

Table 22: GAE and managed healthcare expenditure

	Open schemes				Restricted schemes			
	Self-administered		Third-party		Self-administered		Third-party	
	pabpm R	% change	pabpm R	% change	pabpm R	% change	pabpm R	% change
2000	37.5	-	48.7	-	24.7	-	38.3	-
2001	62.8	67.5	62.7	28.9	31.3	26.6	41.5	8.4
2002	55.8	(11.2)	69.8	11.3	37.3	19.4	49.3	18.8
2003	69.2	24.0	78.4	12.3	33.0	(11.7)	55.8	13.2
2004	75.9	9.8	86.1	9.8	43.3	31.4	59.1	6.1
2005	80.8	6.4	91.9	6.8	41.8	(3.5)	67.8	14.7
2006	84.1	4.1	96.9	5.4	39.0	(6.7)	67.2	(0.9)
2007	89.8	6.8	101.8	5.0	41.3	6.0	65.8	(2.0)
2008	96.3	7.3	108.5	6.6	39.3	(4.9)	65.5	(0.6)
2009	109.8	14.0	118.9	9.6	45.1	14.8	71.9	9.7

GAE = Gross Administration Expenditure

pabpm = per average beneficiary per month



beneficiaries (2008: 422 154), and 28 third-party-administered open schemes (2008: 32) representing 4 350 833 average beneficiaries (2008: 4 444 055).

Self-administered open schemes experienced an increase of 14.0% from R96.3 pabpm to R109.8 pabpm while third-party-administered open schemes increased their expenditure by 9.6% to R118.9 pabpm from R108.5 pabpm in 2008. Third-party-administered open schemes paid 8.3% more for administration and managed healthcare services than self-administered open schemes; the proportion was 12.6% in 2008.

During 2009, there were 10 self-administered restricted schemes (2008: 11) representing 260 657 beneficiaries (2008: 257 008), and 67 third-party-administered restricted schemes (2008: 71) representing 2 854 915 beneficiaries (2008: 2 586 481). Self-administered restricted schemes spent on average 59.4% less on administration and managed healthcare management fees at R45.1 pabpm compared to the R71.9 pabpm of third-party-administered restricted schemes.

Table 22 also shows that self-administered open schemes paid 143.6% (2008: 145.1%) more pabpm for administration and managed healthcare expenditure than self-administered restricted schemes. Third-party-administered open schemes paid 65.4% (2008: 65.6%) more pabpm for administration and managed healthcare expenditure than third-party-administered restricted schemes.

Table 23 takes the 10 largest schemes by number of average beneficiaries, and shows their total expenditure on administration and managed healthcare management fees. The industry averages were 8.8% for gross administration and 11.1% for administration plus managed healthcare.

Broker costs

Table 23: Administration expenditure of 10 largest schemes

Name of medical scheme	Type	Average beneficiaries	GAE as % of GCI	GAE + managed healthcare expenditure as % of GCI
Discovery Health Medical Scheme	Open	1,996,866	10.7	13.1
Government Employees Medical Scheme (GEMS)	Restricted	991,872	4.7	6.5
Bonitas Medical Fund	Open	641,674	9.2	12.2
South African Police Service Medical Scheme (POLMED)	Restricted	471,285	4.8	6.9
Medihelp	Open	213,386	8.3	10.0
Bankmed	Restricted	200,012	7.8	10.3
Fedhealth Medical Scheme	Open	189,259	10.0	12.1
Momentum Health	Open	177,765	9.5	12.1
Medshield Medical Scheme	Open	175,578	9.6	12.3
Sizwe Medical Fund	Open	160,316	10.3	12.4

Broker costs include all commissions, service fees, and other distribution costs.

Broker costs remained fairly stable at R1.1 billion, representing only a slight increase for all schemes of 1.7% from 2008 to 2009.

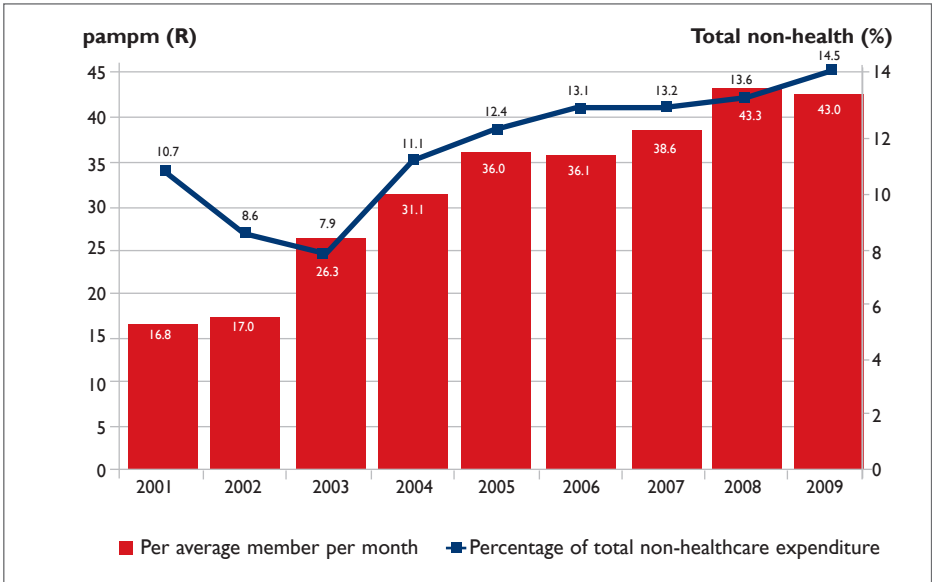
Broker costs represented 10.4% of total non-healthcare expenditure in 2009; broker costs as a percentage of total non-healthcare expenditure was 11.4% in 2008.

For schemes that pay broker fees, the amounts paid on a per average member per month (pabpm) basis decreased to R41.2 in 2009 from R42.4 pabpm in 2008, representing a decrease of 2.8%. Broker commissions as a percentage of GCI decreased from 2.2% in 2008 to 2.0% in 2009, which is a decrease of 10.4%.

Figure 33 shows annual broker service fees since 2001, as well as their percentage shares of total non-health expenditure.

Figure 34 illustrates the increase in broker fees relative to membership of schemes that pay brokers.

Figure 33: Broker service fees (open schemes)



pabpm = per average member per month

Broker service fees have been rising sharply over the past few years, resulting in their rates of increase now far exceeding the increases in number of members. For those schemes that paid brokers, broker service fees pampm increased by 169.6% since 2000 compared with an 81.6% net increase in the average number of members. The substantial increases in broker service fees are not proportional to the increase in new members.

Figure 34: Broker fees and scheme membership

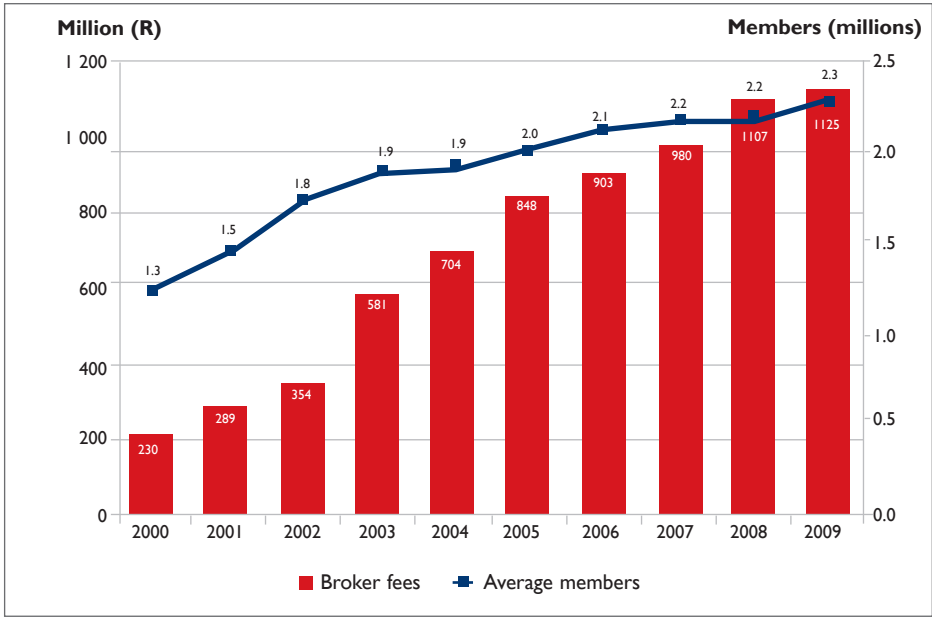


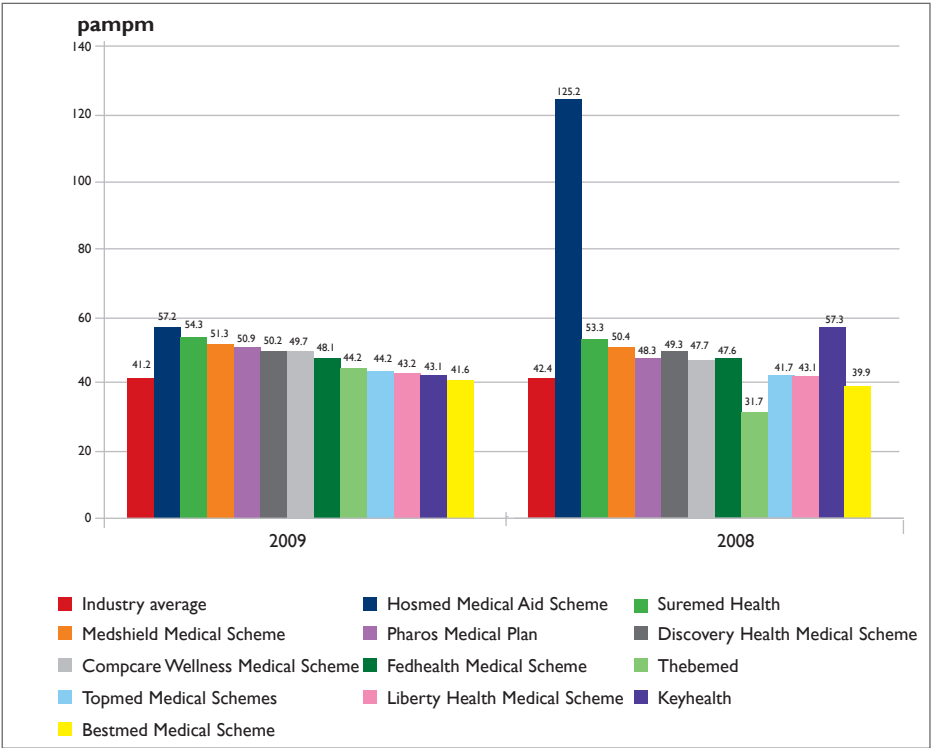
Table 24 illustrates the schemes that had broker service fees at levels higher than the industry average of R41.2 pampm (2008: R42.4 pampm). These 12 schemes (2008: 10) represented 55.1% (2008: 53.2%) of total membership that paid for broker service fees, and 66.1% (2008: 64.4%) of total broker service fees paid. Six of these schemes paid at levels 20.0% greater than the industry average.

Table 24: Schemes with broker fees above the industry average of R41.2 pampm

Name of medical scheme	Type	2009 pampm R	2008 pampm R	% change
Hosmed Medical Aid Scheme	Open	57.2	125.2	-54.3
Suremed Health	Open	54.3	53.3	1.9
Medshield Medical Scheme	Open	51.3	50.4	1.8
Pharos Medical Plan	Open	50.9	48.3	5.4
Discovery Health Medical Scheme	Open	50.2	49.3	1.8
Compcare Wellness Medical Scheme	Open	49.7	47.7	4.3
Fedhealth Medical Scheme	Open	48.1	47.6	1.1
Thebemed	Open	44.2	31.7	39.7
Topmed Medical Scheme	Open	44.2	41.7	5.9
Liberty Health Medical Scheme	Open	43.2	43.1	0.5
Keyhealth	Open	43.1	57.3	-24.7
Bestmed Medical Scheme	Open	41.6	39.9	4.2

pampm = per average member per month

Figure 35: Schemes with broker fees above the industry average of R41.2 pampm



pampm = per average member per month

Reinsurance results

Three schemes had reinsurance contracts in 2009 (2008: 3). They made a net healthcare deficit of R19.3 million; their net reinsurance result was a surplus of R639 000.

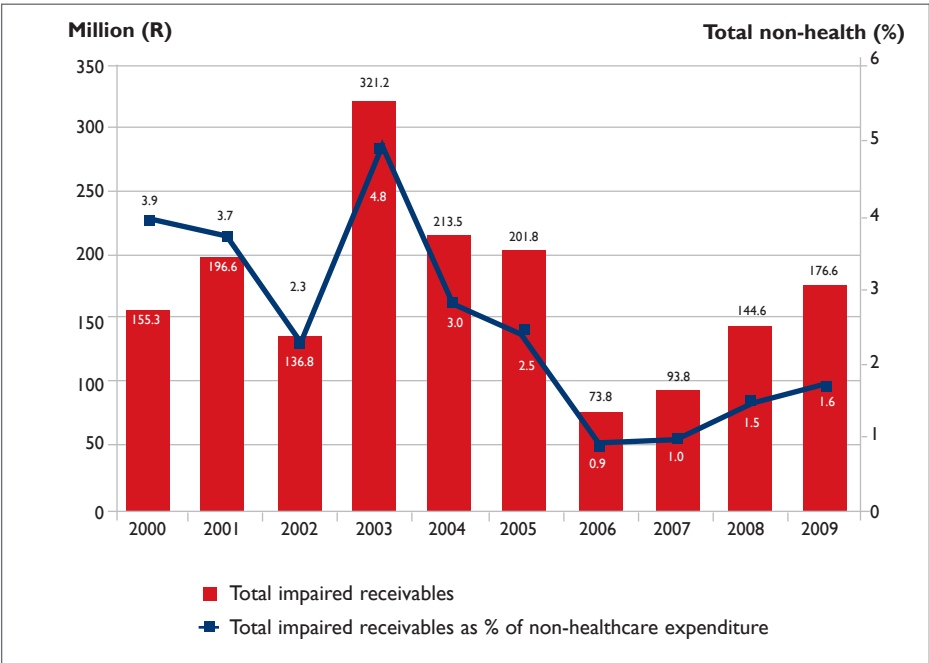
Impaired receivables

Impaired receivables (previously known as bad debts) increased by 22.2% to R176.6 million for the year under review from R144.6 million in 2008. They represented 1.6% of total non-healthcare expenditure (1.5% in 2008).

It took schemes on average 9.6 days to collect debts (contributions from their members) in 2009; this is a decrease of 23.8% from 12.6 days in 2008. But this collection period falls well outside the legal provisions which require that members pay all contributions to their scheme not later than three days after the payment is due. The associated risks of not paying and collecting contributions timeously are the possible impairment of the debtor and paying claims when contributions have not been received.

Figure 36 shows the trend in impaired receivables over the past 10 years, also expressed as a percentage of total non-healthcare expenditure.

Figure 36: Impaired receivables

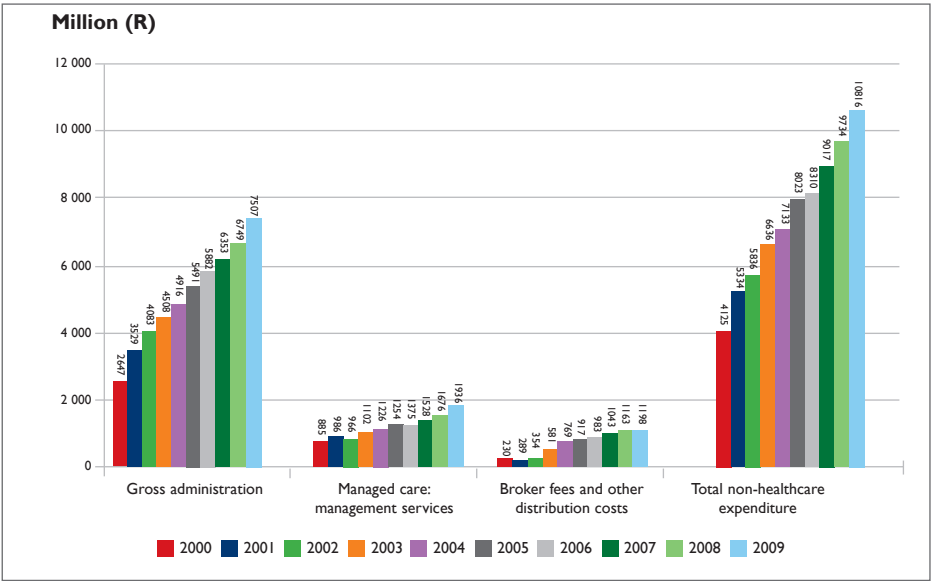


Trends in non-healthcare expenditure

Total net non-healthcare expenditure rose by 11.1% from R9.7 billion in 2008 to R10.8 billion in 2009. Before 2006, the increase in non-healthcare expenditure was consistently higher than CPIX (CPI excluding interest rates on mortgage bonds). The rate of increase seems to have stabilised in the last three years.

Figure 37 shows the changes in the major categories of non-healthcare expenditure for the past 10 years.

Figure 37: Changes in non-healthcare expenditure

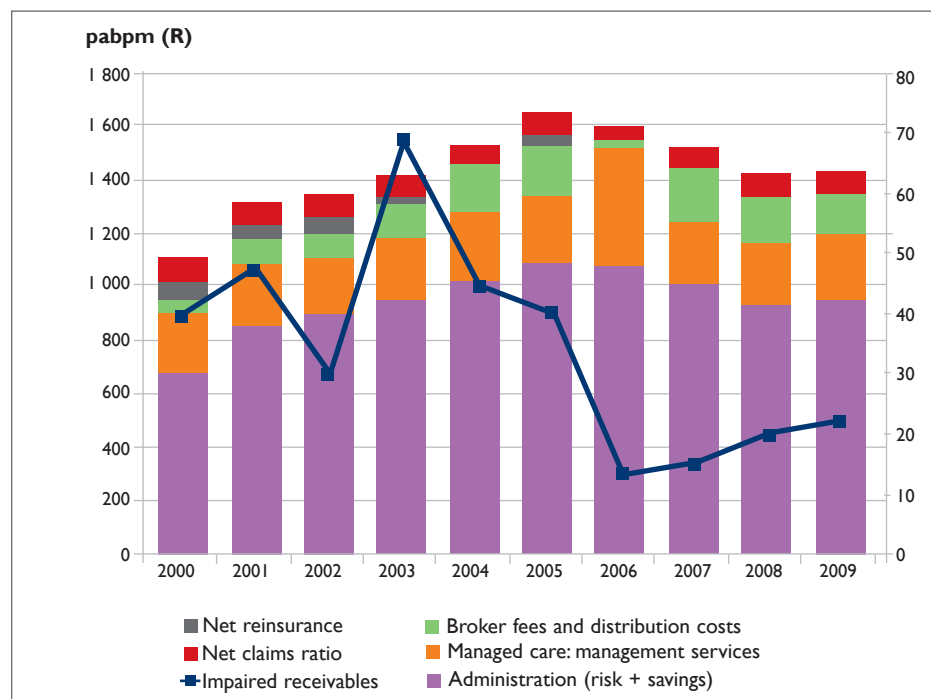


Total gross non-healthcare expenditure has increased by 162.2% since 2000. (Gross non-administration costs equal to net administration costs as no administration costs were paid in relation to savings accounts.) This was driven by a 183.6% upswing in administration fees, a 118.6% rise in fees paid for managed healthcare, and an increase of 421.2% in broker costs.

By comparison, gross claims have risen by 179.5% since 2000.

Figure 38 and Table 25 show that, after adjusting for inflation, gross non-healthcare expenditure per average beneficiary per annum (pabpa) increased by 0.7% to R1 361.2 in 2009 from R1 352.2 in 2008. The net claims ratio increased to 89.3% in 2009 from 86.9% in 2008.

Figure 38: Non-healthcare expenditure pabpa: 2009 prices\*



pabpm = per average beneficiary per month

\*The values were adjusted for CPIX for 2000-2009 (rebased factors).

Table 25: Trends in contributions, claims, and non-healthcare expenditure: 2009 prices\*

	Gross contributions		Gross claims		Gross non-healthcare expenditure	
	pabpa R	% growth	pabpa R	% growth	pabpa R	% growth
2000	7,831.7	6.4	6,989.3	6.1	1,055.7	28.2
2001	8,838.6	12.9	7,407.4	6.0	1,285.9	21.8
2002	9,406.8	6.4	7,756.7	4.7	1,285.4	0.0
2003	10,135.1	7.7	8,064.9	4.0	1,400.2	8.9
2004	10,715.3	5.7	8,480.4	5.2	1,483.4	5.9
2005	10,762.2	0.4	9,056.2	6.8	1,593.2	7.4
2006	10,550.5	-2.0	9,366.9	3.4	1,523.1	-4.4
2007	10,502.9	-0.5	9,158.7	-2.2	1,446.6	-5.0
2008	10,294.4	-2.0	9,012.8	-1.6	1,352.2	-6.5
2009	10,679.7	3.7	9,603.1	6.5	1,361.2	0.7
Since 2000		36.4		37.4		28.9

pabpa = per average beneficiary per annum

\*The values were adjusted for CPIX for 2000-2009. Inflation factors were rebased from 2000.

Figure 38 and Table 25 also show how non-healthcare expenditure outpaced contributions and claims in most years until 2005. Total non-healthcare expenditure grew at more than 20.0% per annum from 1999 to 2001 before stabilising.

Table 26 shows the nine open schemes with non-healthcare expenditure greater than both the industry average of R140.4 pabpm and the open schemes average of 16.9% when expressed as a percentage of Risk Contribution Income (RCI).

Table 26: Trends in claims, non-healthcare expenditure, and reserve-building as a percentage of contributions (open schemes)

Name of medical scheme	Net non-healthcare expenses		Net claims incurred		Net non-healthcare expenses		Reserve-building	
	pabpm 2009 R	pabpm 2008 R	As % of RCI 2009	As % of RCI 2008	As % of RCI 2009	As % of RCI 2008	As % of RCI 2009	As % of RCI 2008
Bestmed Medical Scheme	159.6	135.9	84.1	84.2	19.8	19.3	(3.9)	(3.5)
Community Medical Aid Scheme (COMMED)	170.4	173.2	91.9	89.4	18.6	22.8	(10.5)	(12.2)
Compcare Wellness Medical Scheme	180.3	193.4	104.4	97.4	17.0	20.3	(21.4)	(17.7)
Discovery Health Medical Scheme	154.4	144.0	80.1	78.2	19.4	20.0	0.5	1.8
Oxygen Medical Scheme	141.0	108.7	91.0	88.9	17.1	15.2	(8.1)	(4.1)
Pharos Medical Plan	180.6	165.7	78.8	75.9	18.2	18.4	3.0	5.7
Resolution Health Medical Scheme	163.4	150.4	77.1	74.3	26.2	27.1	(3.3)	(1.4)
Suremed Health	153.0	148.1	87.2	79.0	18.1	17.9	(5.3)	3.1
Topmed Medical Scheme	148.3	141.3	89.0	91.6	17.3	17.8	(6.3)	(9.4)
Industry average: open schemes	140.4	128.7	86.6	84.1	16.9	17.3	-2.3	(1.4)

pabpm = per average beneficiary per month

RCI = Risk Contribution Income

Figure 39 shows the schemes in Table 26 that had a solvency ratio below the open schemes average of 27.4%. We are concerned that some of these schemes fall below the 25.0% solvency target yet exhibit very high levels of non-healthcare expenditure.



**Figure 39: Open schemes with high non-healthcare expenditure and solvency ratio below average**

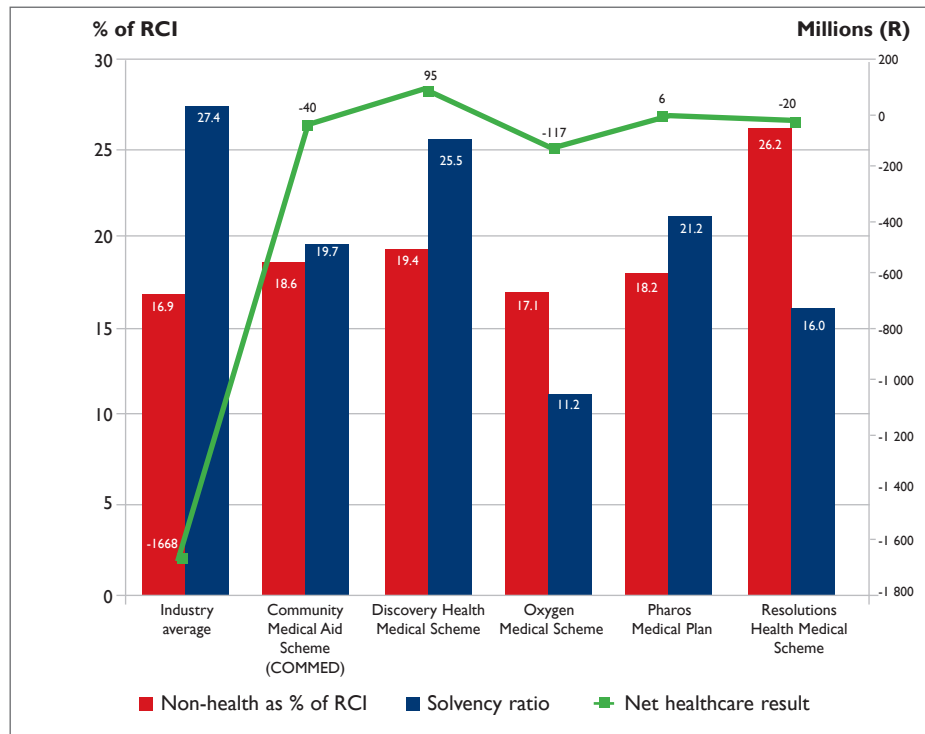
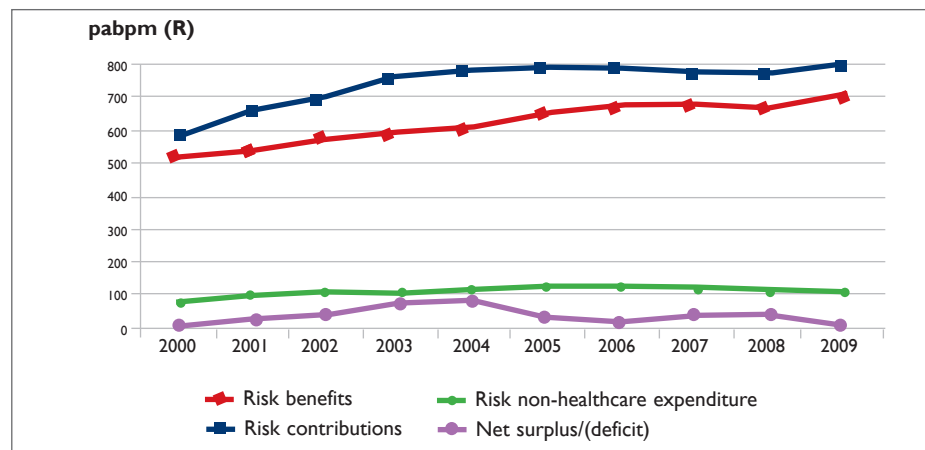


Figure 40 depicts information on contributions, benefits, non-healthcare expenditure, and operating surpluses pabpm. The trade-off between non-healthcare expenditure and annual surpluses pabpm was growing since 2000 but it decreased in 2003, almost levelling out in 2004. This gap has since grown again.

**Figure 40: Risk contributions, benefits, non-healthcare expenditure, and operating surpluses: 2009 prices\***



pabpm = per average beneficiary per month

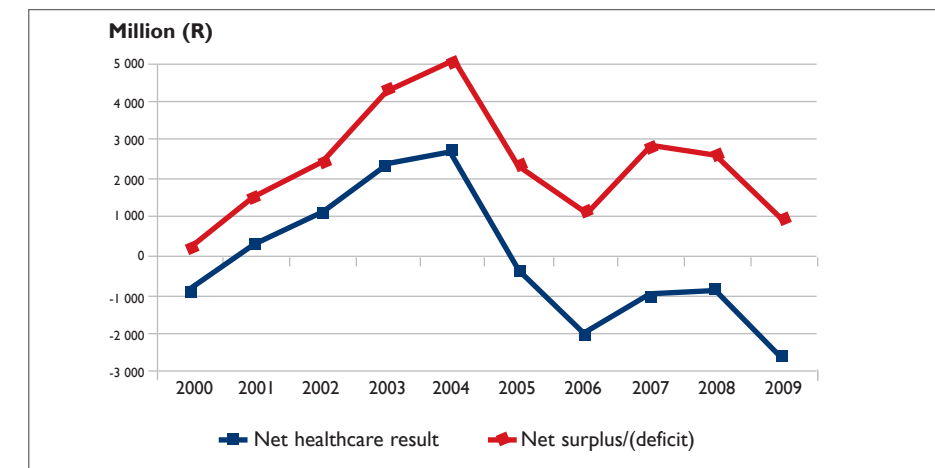
\*The values were adjusted for CPIX for 2000-2009 (rebased factors).

## Net healthcare results and trends

The net healthcare result of a medical scheme illustrates its position after benefits and non-healthcare expenditure are deducted from contribution income.

The net healthcare result for all schemes combined was a deficit of R2.6 billion in 2009 (2008: R0.9 billion deficit). Open schemes incurred deficits of R1.7 billion (2008: R0.6 billion) and restricted schemes of R0.9 billion (2008: R0.3 billion). This indicates that schemes had difficulties coping with increased claims costs (net healthcare expenditure), which increased by 14.6% per average beneficiary per month in 2009.

**Figure 41: Net healthcare results**



The inclusion of investment and other income resulted in schemes making a net surplus of R964.0 million in 2009. Net investment and other income increased by 5.4% to R3.6 billion. This was 368.5% of net surplus and underscores the importance of investment income for schemes that experience a difficult operating year.

Table 27 lists the 20 schemes with the highest net healthcare deficits. Investment income has resulted in a number of these schemes not experiencing major drops in their solvency levels.

Fifty-two per cent (or 17 of 33) of open schemes and 34.0% (26 of 77) of restricted schemes made net deficits after investment income.

The net surplus after investment income and consolidation adjustments of all schemes combined was R1.0 billion (2008: R2.4 billion). Open schemes made a R0.3 billion (2008: R1.4 billion) surplus and restricted schemes a surplus of R0.7 billion (2008: R1.0 billion). Net investment and other income increased by 5.4% to R3.6 million in 2009.

The net healthcare and net results of all schemes since 2000 are reflected in Figure 41.

Referring to Figure 40 and 41, one can see the impact of the increases in claims costs on the net healthcare result.



Table 27: 20 schemes with the largest net healthcare deficits

Name of medical scheme	Type	Net healthcare result			Solvency ratio	
		2009 R'000	2008 R'000	% growth	2009 %	2008 %
Bonitas Medical Fund	Open	(451,435)	(218,274)	(106.8)	35.7	47.3
South African Police Service Medical Scheme (POLMED)	Restricted	(238,929)	(63,197)	(278.1)	29.2	35.7
Transmed Medical Fund	Restricted	(219,217)	(138,978)	(57.7)	28.9	41.6
Medihelp	Open	(186,201)	74,340	(350.5)	31.5	35.8
Medshield Medical Scheme	Open	(137,619)	(90,794)	(51.6)	52.0	60.9
Fedhealth Medical Scheme	Open	(119,631)	(36,717)	(225.8)	25.8	28.2
Oxygen Medical Scheme	Open	(117,316)	(60,787)	(93.0)	11.2	16.6
Pro Sano Medical Scheme	Open	(108,365)	(67,641)	(60.2)	28.1	36.5
Keyhealth	Open	(104,707)	(16,435)	(537.1)	14.7	17.9
Compcare Wellness Medical Scheme	Open	(86,751)	(69,608)	(24.6)	27.9	39.6
MEDCOR	Restricted	(84,496)	(49,673)	(70.1)	10.9	20.6
Momentum Health	Open	(71,288)	(46,519)	(53.2)	15.8	18.7
Platinum Health	Restricted	(68,248)	(19,012)	(259.0)	32.0	47.4
Liberty Health Medical Scheme	Open	(66,229)	14,635	(552.5)	19.5	22.8
Sizwe Medical Fund	Open	(65,191)	(32,607)	(99.9)	38.3	40.8
Bankmed	Restricted	(56,068)	(37,438)	(49.8)	51.1	52.7
Gen-Health Medical Scheme	Open	(55,609)	(37,880)	(46.8)	21.5	49.2
Medicover	Open	(55,113)	(95,419)	42.2	39.2	36.9
Nedgroup Medical Aid Scheme	Restricted	(49,380)	(40,518)	(21.9)	45.1	47.6
Community Medical Aid Scheme (COMMED)	Open	(39,566)	(32,821)	(20.5)	19.7	35.5

Table 28 shows the 20 schemes with the largest net healthcare deficits by the Risk Assessment Framework (RAF) classification; they represent 39.7% of all average beneficiaries that suffered operating deficits. (Annexure M has more details on this.)

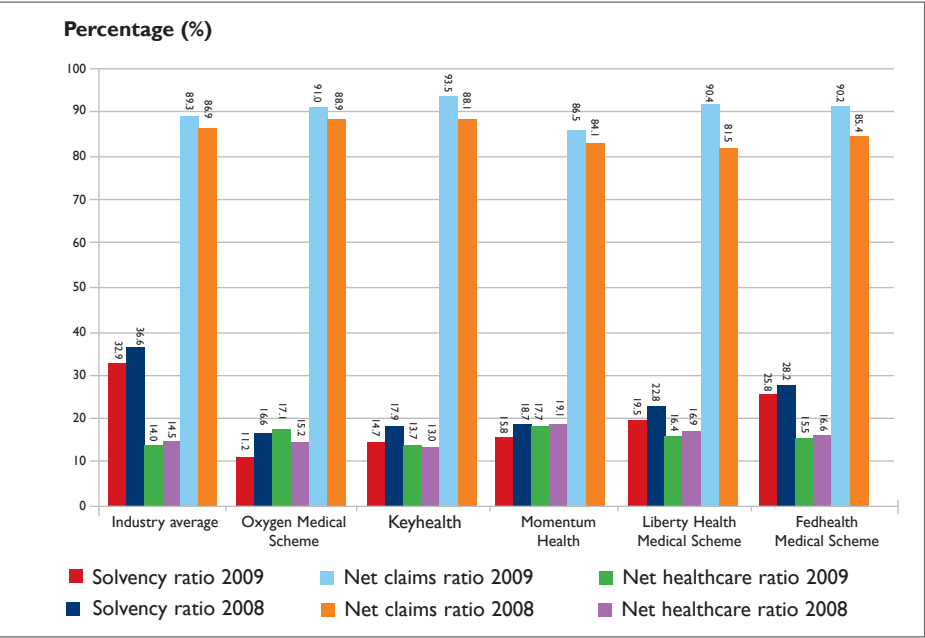
Table 28: 20 schemes with the largest net healthcare deficits by RAF classification

Name of medical scheme	Type	Net healthcare result			RAF classifica- tion
		2008 R'000	2007 R'000	% growth	
Bonitas Medical Fund	Open	(451,435)	(218,274)	(106.8)	High
South African Police Service Medical Scheme (POLMED)	Restricted	(238,929)	(63,197)	(278.1)	High
Transmed Medical Fund	Restricted	(219,217)	(138,978)	(57.7)	High
Medihelp	Open	(186,201)	74,340	(350.5)	High
Medshield Medical Scheme	Open	(137,619)	(90,794)	(51.6)	High
Fedhealth Medical Scheme	Open	(119,631)	(36,717)	(225.8)	High
Oxygen Medical Scheme	Open	(117,316)	(60,787)	(93.0)	High
Pro Sano Medical Scheme	Open	(108,365)	(67,641)	(60.2)	High
Keyhealth	Open	(104,707)	(16,435)	(537.1)	High
Compcare Wellness Medical Scheme	Open	(86,751)	(69,608)	(24.6)	Medium
MEDCOR	Restricted	(84,496)	(49,673)	(70.1)	Medium
Momentum Health	Open	(71,288)	(46,519)	(53.2)	High
Platinum Health	Restricted	(68,248)	(19,012)	(259.0)	High
Liberty Health Medical Scheme	Open	(66,229)	14,635	(552.5)	High
Sizwe Medical Fund	Open	(65,191)	(32,607)	(99.9)	High
Bankmed	Restricted	(56,068)	(37,438)	(49.8)	High
Gen-Health Medical Scheme	Open	(55,609)	(37,880)	(46.8)	Medium
Medicover	Open	(55,113)	(95,419)	42.2	High
Nedgroup Medical Aid Scheme	Restricted	(49,380)	(40,518)	(21.9)	Medium
Community Medical Aid Scheme (COMMED)	Open	(39,566)	(32,821)	(20.5)	Medium

RAF = Risk Assessment Framework

Figure 42 shows the high-impact schemes with the largest net healthcare deficits and whose solvency levels are below the industry average of 32.9%. (Annexure N provides more details.)

Figure 42: High-impact schemes with the largest net healthcare deficits and solvency levels below the industry average of 32.9%



## Accumulated funds and solvency positions, and trends in solvency

Regulation 29 of the Medical Schemes Act prescribes the minimum accumulated funds to be maintained by medical schemes. Accumulated funds, meaning the net asset value of the scheme excluding inter alia funds set aside for specific purposes and unrealised non-distributable profits, must at all times be maintained at a minimum level of 25.0% of gross contributions. These minimum accumulated funds are more commonly called the “reserves” of a scheme. When expressed as a percentage of gross contributions, they become known as the “solvency ratio” of a scheme.

Solvency levels provide an indication of the financial soundness and sustainability of a medical scheme and, in effect, represent a buffer against unforeseen and adverse fluctuations.

Net assets (i.e. total assets less total liabilities) rose by 2.1% to end the year 2009 at R29.4 billion. Reserves grew by 2.9% to R27.9 billion from the R27.1 billion recorded in 2008.

The average solvency ratio of the industry decreased by 10.1% to 32.9% compared to 36.6% in 2008. It was, however, still greater than the prescribed 25.0%.

The solvency ratio of open schemes was 27.4% (2008: 29.8%). Restricted schemes experienced a decline in their solvency ratios, reaching 42.5% (2008: 49.8%). It should, however, be noted that GEMS also experienced a decrease in its solvency level. Table 27 lists the schemes that experienced the largest net healthcare deficits. Full details of the solvency ratios of all medical schemes in South Africa are contained in Annexures K, L, and M.

Figures 43, 44 and 45 show the changes in solvency ratios in all schemes, open schemes, and restricted schemes respectively. The three Figures reflect improvements in solvency ratios since 2001 when the Act was implemented. The solvency of restricted schemes has, however, been declining since 2006.

Figure 43: Industry solvency trends for all schemes

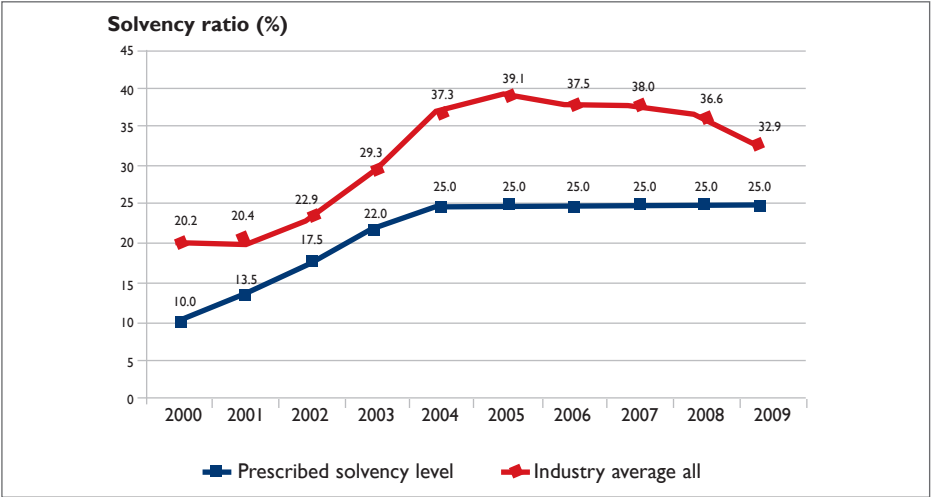
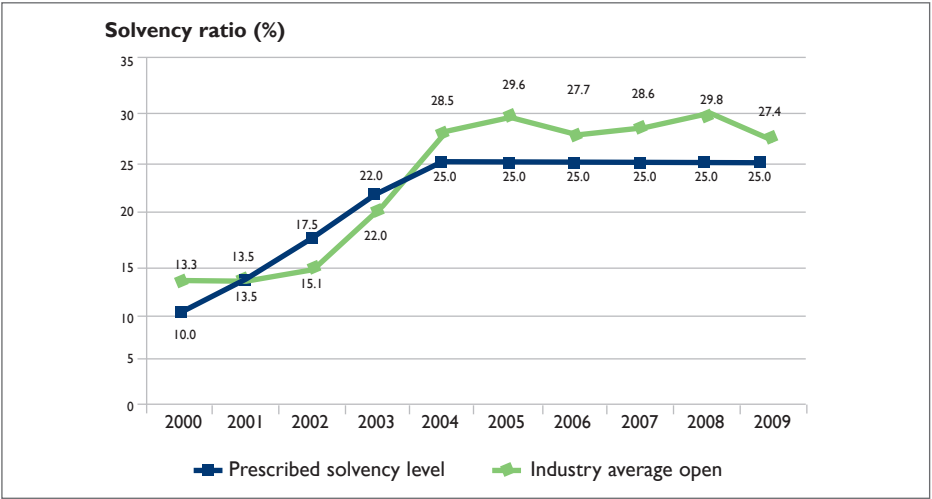
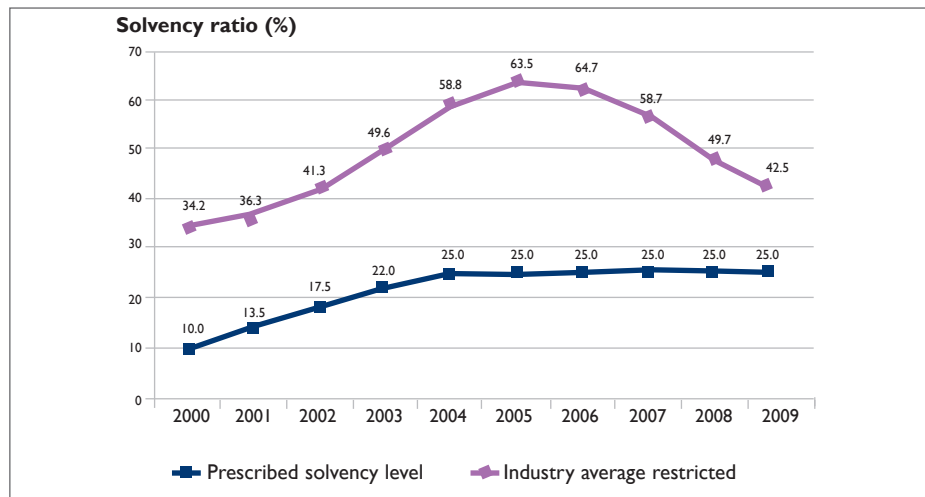


Figure 44: Industry solvency trends for open schemes



**Figure 45: Industry solvency trends for restricted schemes**



## Factors that affect solvency

The most important factors impacting on solvency are:

- the pricing of contributions relevant to benefits provided, including whether such benefits are provided from the risk pool of the scheme or from members' savings monies;
- non-healthcare expenditure; and
- investment income.

The membership profile of a scheme further affects its solvency; it includes the average age of its beneficiaries, pensioner ratio, number of male versus female dependants, and dependent ratio (i.e. the number of single members). The membership profile affects the frequency and extent of claims.

Table 29 looks at non-healthcare expenditure, claims, and contributions relative to reserves.

**Table 29: Trends in risk claims, non-healthcare expenditure, and reserve-building as a percentage of contributions (%)**

	Risk claims	Non-healthcare expenditure	Reserve-building
2000	89.3	14.5	(3.7)
2001	83.2	16.2	0.6
2002	82.1	15.2	2.8
2003	79.2	15.4	5.4
2004	78.6	15.5	5.9
2005	84.1	16.8	(0.0)
2006	88.0	16.2	(4.1)
2007	86.5	15.2	(1.8)
2008	86.9	14.5	(1.4)
2009	89.3	14.0	(3.3)

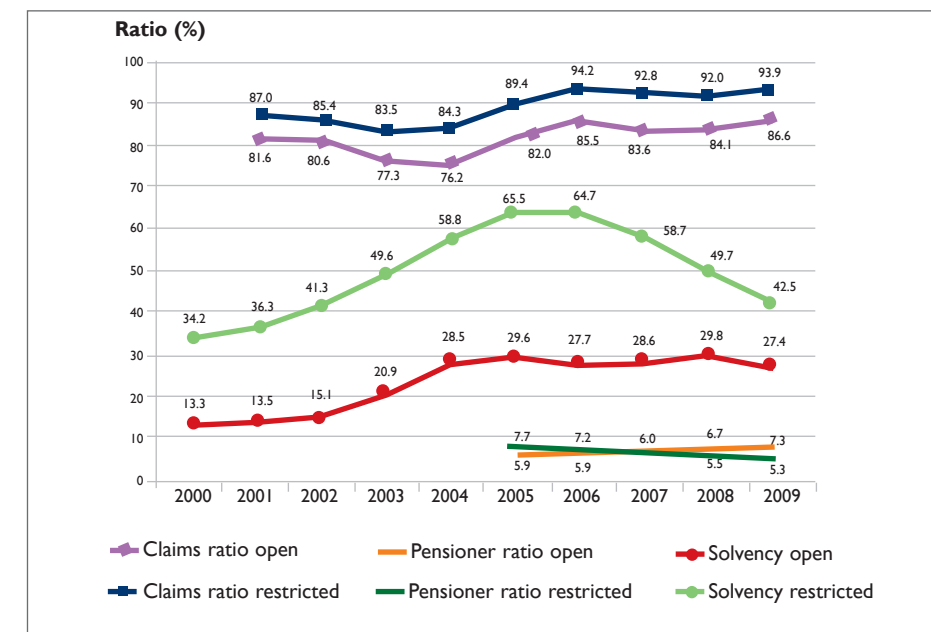
Total risk claims fell between 2000 and 2004, but the ratio of contributions to reserves improved during this period from a negative 3.7% to a positive 5.9%. Non-healthcare expenditure grew during this period, largely at the expense of claims. The claims ratio then started to increase in 2005 and reached 89.3% in 2009. Contributions to reserves were again negative during this time, which is consistent with the fact that most medical schemes have attained the prescribed solvency ratio of 25.0% and do not need to grow their reserves any further.

Investment income also has an important role to play, especially if a scheme experiences net healthcare losses.

Figure 46 illustrates the impact of GEMS on all medical schemes. (The scheme was registered on 1 January 2005 but only started with operations on 1 January 2006.)

GEMS has had a positive effect on the solvency levels of open schemes. Many of these schemes had previously structured their benefits specifically for government employees who are now steadily leaving to join GEMS. The reserves which these members had accumulated over the years of their membership of these open schemes, were not transferred to GEMS. Also, there was a negative impact on these schemes' claiming patterns as the profile of members who left them and went to GEMS tended to be young and healthy.

**Figure 46: The impact of GEMS\***



\* Claims data was available only from 2001 onwards, and pensioner ratios from 2004 onwards.



Furthermore, schemes should be careful of the so-called “death spiral”. A medical scheme with a bad, high-claiming membership profile may need to adjust its contributions and/or benefits. This can result in options with older and sicker members being over-priced, causing the younger and lower-claiming members to move to other less expensive options, or even other schemes. This results in the scheme losing the cross-subsidy provided by these younger members and hence an increase in losses, resulting in even higher contribution increases and/or the lowering of benefits.

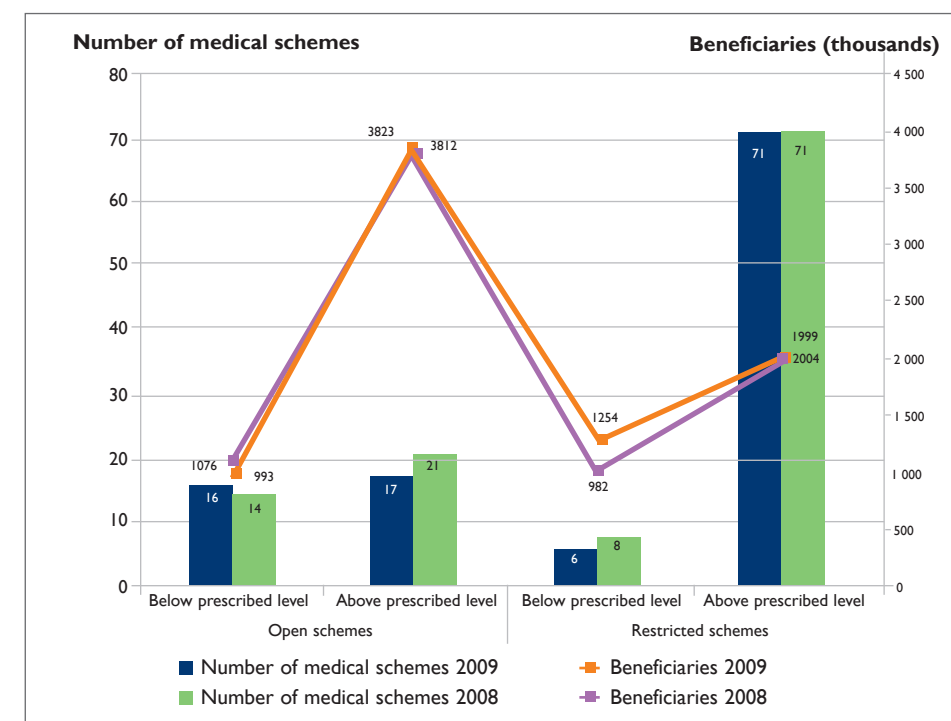
### Beneficiaries of schemes which failed to meet the 25.0% solvency level

Table 30 shows both the number of schemes which have yet to attain the prescribed solvency ratio of 25.0% and the number of beneficiaries in those schemes; these numbers are also shown in Figure 47.

Table 30: Prescribed solvency levels and number of beneficiaries

Open schemes					Restricted schemes			
		Below prescribed level		Above prescribed level	Below prescribed level		Above prescribed level	
Number of medical schemes								
		2000	15	33	15	86		
		2001	19	29	11	83		
		2002	24	25	7	86		
		2003	19	29	7	80		
		2004	18	30	4	81		
		2005	17	29	4	79		
		2006	18	23	4	79		
		2007	18	23	7	74		
		2008	14	21	8	71		
2009		16	17	6	71			
Number of beneficiaries		At end	%	At end	At end	%	At end	
		2000	2,385,051	51.0	2,291,048	839,029	40.9	1,214,412
		2001	2,650,934	55.6	2,117,142	576,462	28.9	1,419,862
		2002	3,519,329	74.4	1,211,882	251,050	12.7	1,731,873
		2003	3,426,988	72.6	1,291,809	222,430	11.4	1,730,574
		2004	2,534,273	53.3	2,221,030	80,160	4.2	1,827,100
		2005	2,783,108	56.7	2,122,444	36,359	1.9	1,893,710
		2006	3,218,382	63.7	1,832,056	145,369	7.0	1,931,536
		2007	3,139,176	63.4	1,812,141	689,865	26.0	1,964,054
		2008	1,076,450	22.0	3,812,456	981,977	32.9	2,003,943
2009		992,523	20.6	3,822,811	1,254,151	38.6	1,999,020	

Figure 47: Prescribed solvency levels and number of beneficiaries



According to Table 30 and Figure 47, the absolute levels of solvency have increased considerably over the past 10 years – and only 20.6% of beneficiaries in open schemes (2008: 22.0%) were covered by the 16 schemes (2008: 14) which failed to meet the prescribed solvency level in 2009. The remaining beneficiaries belonged to the other 17 open schemes (2008: 21) which had attained the prescribed solvency level of 25.0%.

The decrease in the number of beneficiaries belonging to open schemes which have yet to achieve the prescribed solvency is primarily attributable to Discovery Health Medical Scheme – the largest open scheme in South Africa based on the number of beneficiaries in December 2009 – finally reaching the statutory solvency level at the end of 2008.

By contrast, the number of beneficiaries in restricted schemes which have yet to attain a solvency of 25.0% has increased. This is largely due to GEMS, which is the biggest restricted scheme based on the number of beneficiaries for 2009, increasing its membership base during the year under review.

Much work continues to be done to ensure that all schemes achieve statutory solvency levels. Most beneficiaries in restricted schemes found themselves in schemes that were meeting the prescribed solvency level; of the 77 restricted schemes, only six had a solvency below 25.0%. These six, however, constitute 38.6% of all beneficiaries in restricted schemes. It should be noted that GEMS still finds itself below the statutory phase-in solvency level of 22.0% and that it accounts for 91.5% of beneficiaries in schemes that have yet to achieve the prescribed solvency ratio.

## RAF and high-impact medical schemes

The Risk Assessment Framework (RAF) initiative that was started in 2003 allows the Office to better identify schemes which may have the biggest systemic impact on the goals of the CMS and the industry were they to fail; it enables us to identify high-impact schemes. These are schemes whose failure, financial or other, would have a major impact on the industry; the classification does not necessarily mean that the scheme is a big-risk scheme or that it is experiencing problems.

Of the 29 schemes classified as high-impact in 2009 (2008: 30), two (2008: 3) had a solvency ratio below 10.0%, two (2008: 2) had a solvency ratio of 10.0-15.0%, five (2008: 3) of 15.0-20.0%, and one (2008: 3) of 20.0-25.0%. The remaining 19 high-impact schemes (2008: 19) had met the prescribed solvency of 25.0% by the end of 2009.

Table 31 shows that the average contributions of high-impact open schemes were 10.0% higher than those of high-impact restricted schemes. High-impact open schemes paid benefits that were 1.5% higher than those of high-impact restricted schemes. The gross non-healthcare expenditure expressed as a percentage of GCI of these open schemes exceeds the gross non-healthcare expenditure of high-impact restricted schemes by 101.2%. This tendency allowed restricted schemes to attain higher reserves than open schemes.

Table 31: High-impact schemes by type

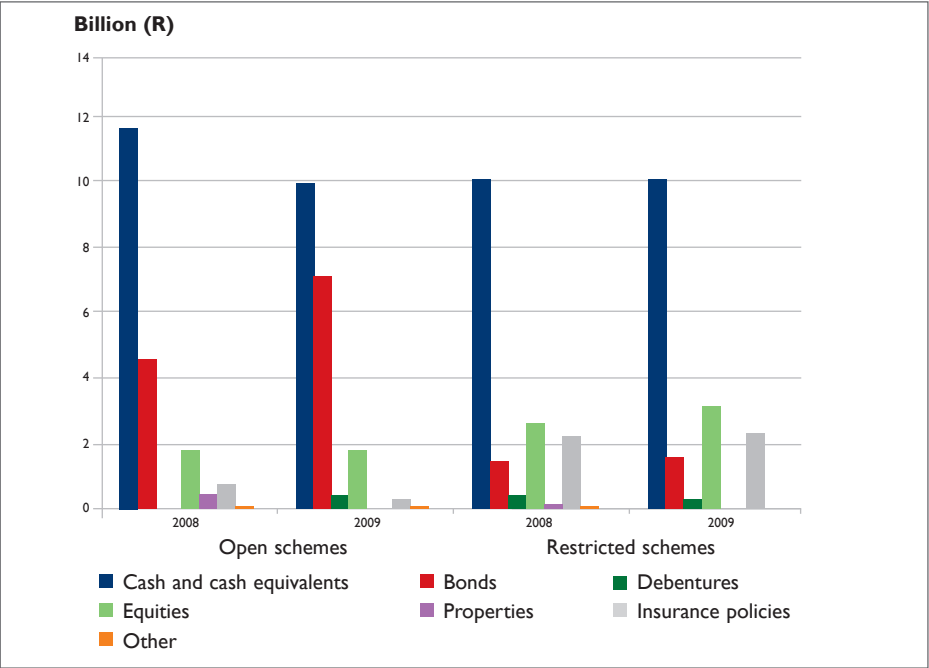
	Average beneficiaries		Gross contributions pabpm (R)		Gross claims ratio (%)		Gross non-healthcare ratio (%)		Solvency ratio (%)	
	2009	2008	2009	2008	2009	2008	2009	2008	2009	2008
Open schemes	4,528,712	4,522,909	835.1	749.8	86.2	83.6	16.9	17.2	26.9	29.0
Restricted schemes	2,238,545	1,946,917	759.2	680.4	93.4	91.1	8.4	8.5	27.1	33.1
All schemes	6,767,257	6,469,826	810.0	728.9	88.5	85.7	14.3	14.8	26.9	30.1

pabpm = per average beneficiary per month

## Investments

Figure 48 provides information on the investments of medical schemes as at the end of 2009.

Figure 48: Scheme investments



In open schemes, 50.4% of investments (2008: 60.0%) were held in cash or cash equivalents. Bonds accounted for 36.1% (2008: 23.4%), debentures for 1.9% (2008: 0.0%), equities for 9.3% (2008: 9.3%), insurance policies for 1.9% (2008: 4.3%), properties for 0.1% (2008: 2.4%), and other investments for 0.4% (2008: 0.6%).

Restricted schemes also held a large proportion of their investments (57.2%) in cash or cash equivalents (2008: 60.0%). Their bonds accounted for 9.7% (2008: 8.6%) and debentures for 1.2% (2008: 0.1%). Equities made up 17.8% (2008: 15.9%), insurance policies 13.7% (2008: 13.3%), properties 0.1% (2008: 1.1%), and other investments 0.3% (2008: 1.0%).

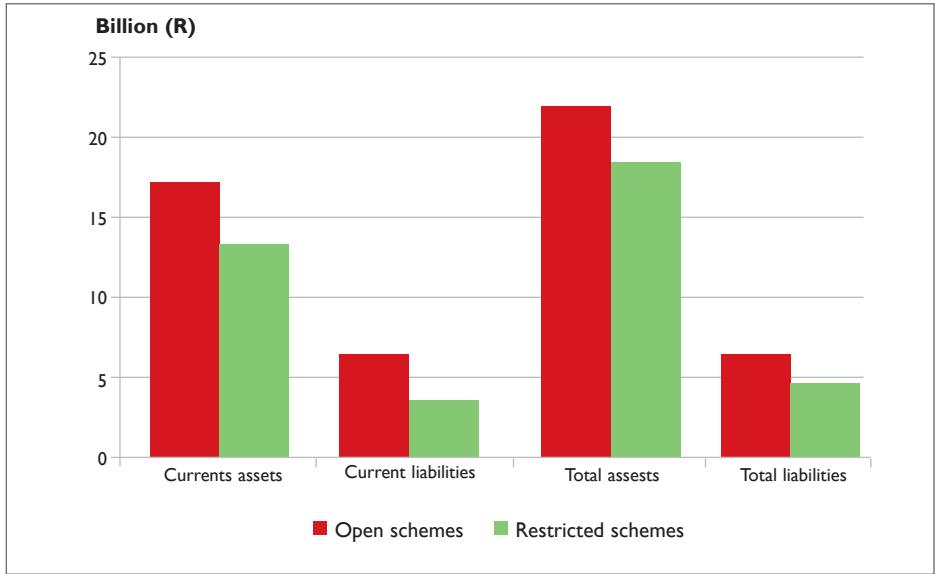
The primary obligation of a medical scheme is to ensure that it has sufficient assets to pay benefits to its members when those benefits fall due. The management of its assets must therefore be structured to cope with the demands, nature, and timing of its expected liabilities. The assets of a scheme should be spread in such a manner that they match its liabilities and minimum accumulated funds (reserves) at any point in time. Trustees need to monitor investments closely, not only to ensure compliance with legal requirements, but also to diversify risk appropriately.

The difference between the total assets of a scheme and its total liabilities represents the liquidity gap. A positive number indicates that the scheme has sufficient assets to meet its liabilities. A negative number, on the other hand, indicates that the scheme has greater liabilities than assets.

But schemes should pay attention to more than just their total asset and liability positions; they should also give thought to the periods in which liabilities must be paid and in which assets can be converted into cash flows. This is where financing risks must be matched.

Figure 49 compares the matching of assets and liabilities in open and restricted schemes.

Figure 49: Matching assets and liabilities



The current-assets-to-current-liabilities ratio in open schemes was 2.6:1 in 2009 (2.6:1 in 2008 as well); it was 3.5:1 (2008: 3.8:1) in restricted schemes. The total-asset-to-total-liability ratio for open and restricted schemes was 3.4:1 (2008: 3.3:1) and 4.0:1 (2008: 4.6:1) respectively.

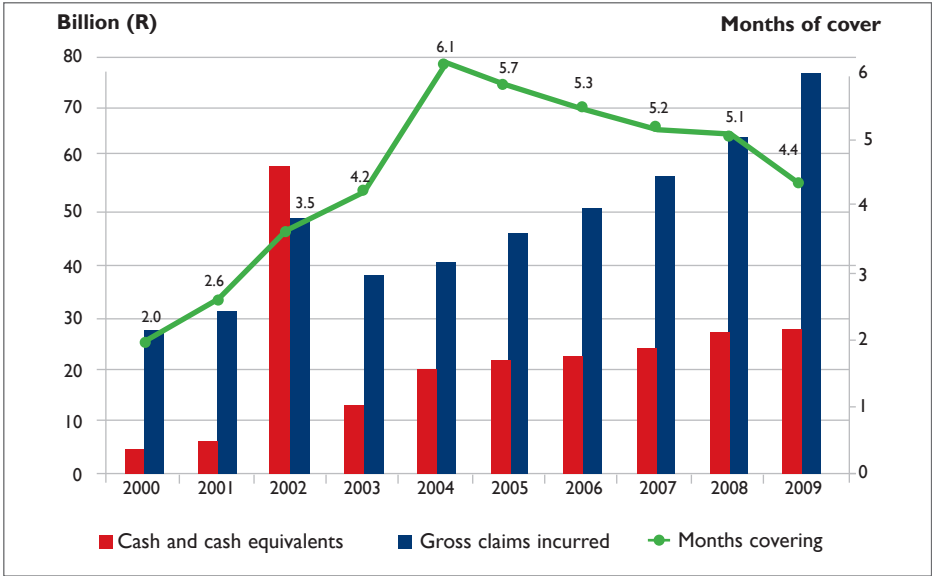
The principle of matching assets with liabilities is particularly important in the context of liquidity. Where the claims-paying ability of schemes with low liquidity (i.e. a quick ratio below 2.0) is lower than the industry average of 5.1 months, Boards of Trustees must guard against longer-term and, therefore, riskier investments. Even though such investments may offer the expectancy of higher returns, they may prove detrimental to the scheme should it experience a liquidity crunch.

## The claims-paying ability of medical schemes

The financial soundness of a scheme is also measured by its ability to pay claims from cash and cash equivalents.

Figure 50 depicts the claims-paying ability of schemes measured in months of cover. This is the number of months for which the scheme can pay claims from its existing cash and cash equivalents.

Figure 50: Average gross claims covered by cash and cash equivalents



The cash coverage declined from 5.1 months in 2008 to 4.4 months as at December 2009, but the payment cycles of schemes reflect an improved trend of 15.2 days compared with the 15.9 days reported in 2008.

## Benefit options

The year 2009 saw 354 benefit options (2008: 372) in 111 medical schemes, including those of Solvita Medical Scheme, Purehealth Medical Scheme, and Stocksmid (which liquidated), but excluding Openplan Medical Scheme which amalgamated on 1 January 2009 with Medihelp.

As at the end of 2009, there were 110 registered medical schemes in South Africa.

(There were 119 schemes in 2008, including BHP Billiton SA Medical Scheme (which amalgamated) and Humanity Medical Scheme, Renaissance Health Medical Scheme, Biz Health Medical Scheme, Cawmed Medical Scheme, Mascom Medical Scheme, and Pathfinder Medical Scheme (which liquidated and transferred their members).)

Open schemes accounted for 54.0% or 191 options (2008: 53.8% or 200 options). Restricted schemes had 163 options, representing 46.0% of all options (2008: 172 options or 46.2%).

On average, open schemes had 5.8 options per scheme (2008: 5.4) and an average of 11 227 members per option (2008: 10 685). Restricted schemes had an average of 2.1 options per scheme (2008: 2.1 as well), with an average of 8 243 members per option (2008: 7 277).

Of the 354 benefit options, 154 (43.5%) had fewer than 2 500 members per option (2008: 172 or 46.2%). Of these 154 options, 93 (60.4%) incurred net healthcare losses in 2009. In 2008, 98 options (57.0%) incurred losses. The remaining 200 options (2008: also 200) had more than 2 500 members per option, averaging 16 668 members per option (2008: 16 056). Of these, 65.0% or 130 options incurred net healthcare losses (2008: 120 options or 60.0%)

**Table 32: Results of benefit options**

	Open schemes	% representing	Restricted schemes	% representing	Total
<b>All benefit options</b>					
Number of options	191	54.0	163	46.0	354
Membership represented	2,144,369	61.5	1,343,640	38.5	3,488,009
Number of schemes	33	29.7	78	70.3	111
Net healthcare result	(1,667,851)		(923,782)		(2,591,633)
Gross non-healthcare as % of GCI	15.0		8.8		12.7
Gross claims ratio (%)	87.7		93.9		89.9
Gross claims incurred pbpm	824.9		732.8		787.7
GCI pbpm	940.4		780.6		876.0
<b>Options with &gt;= 2 500 members</b>					
Number of options	106	53.0	94	47.0	200
Membership represented	2,062,253	61.9	1,271,350	38.1	3,333,603
Number of schemes	28	33.7	55	66.3	83
Net healthcare result	(1,397,351)		(749,508)		(2,146,859)
Gross non-healthcare as % of GCI	15.1		8.7		12.8
Gross claims ratio (%)	87.2		93.6		89.5
Gross claims incurred pbpm	810.1		720.6		774.3
GCI pbpm	928.6		770.2		865.3
<b>Options with &lt; 2 500 members</b>					
Number of options	85	55.2	69	44.8	154
Membership represented	82,116	53.2	72,290	46.8	154,406
Number of schemes	27	38.0	44	62.0	71
Net healthcare result	(270,500)		(174,274)		(444,774)
Gross non-healthcare as % of GCI	13.0		10.4		11.9
Gross claims ratio (%)	97.2		98.6		97.8
Gross claims incurred pbpm	1221.5		969.6		1101.0
GCI pbpm	1256.4		983.2		1125.7

GCI = Gross Contribution Income  
pbpm = per beneficiary per month

At the end of 2009, there were 85 options in open schemes with fewer than 2 500 members (2008: 90) at an average of 966 members per option (2008: 1 015), representing 44.5% (2008: 45.0%) of all open schemes options.

Restricted schemes had 69 options with fewer than 2 500 members (2008: 82), with an average of 1 048 members per option (2008: 1 050), representing 42.3% (2008: 47.7%) of all restricted schemes options.

**Table 33: Results of loss-making benefit options**

	Open schemes	% representing	Restricted schemes	% representing	Total
<b>Total loss-making options</b>					
% of total options	63.4		62.6		63.0
Number of options	121	54.3	102	45.7	223
Membership represented	1,439,252	70.7	597,480	29.3	2,036,732
Number of schemes	33	34.4	63	65.6	96
Net healthcare result	(2,960,563,316)		(1,704,016,236)		(4,664,579,552)
Gross non-healthcare as % of GCI	14.1		8.8		12.5
Gross claims ratio (%)	93.4		101.4		95.8
Gross claims incurred pbpm	904.4		986.8		929.0
GCI pbpm	968.2		973.0		969.7
<b>Loss-making options with &gt;= 2 500 members</b>					
Number of options	73	56.2	57	43.8	130
Membership represented	1,392,333	71.7	548,735	28.3	1,941,068
Number of schemes	25	36.8	43	63.2	68
Net healthcare result	(2,639,557,681)		(1,476,022,083)		(4,115,579,764)
Gross non-healthcare as % of GCI	14.2		8.7		12.6
Gross claims ratio (%)	92.8		100.8		95.2
Gross claims incurred pbpm	881.8		982.5		910.8
GCI pbpm	949.8		974.4		956.9
<b>Loss-making options with &lt; 2 500 members</b>					
Number of options	48	51.6	45	48.4	93
Membership represented	46,919	49.0	48,745	51.0	95,664
Number of schemes	24	42.9	32	57.1	56
Net healthcare result	(321,005,635)		(227,994,153)		(548,999,788)
Gross non-healthcare as % of GCI	13.0		9.7		11.6
Gross claims ratio (%)	104.7		108.4		106.2
Gross claims incurred pbpm	1,643.1		1,036.7		1,320.7
GCI pbpm	1,569.9		956.7		1,244.0

GCI = Gross Contribution Income  
pbpm = per beneficiary per month

Of the 354 benefit options within schemes in the year 2009 (2008: 372), 223 (63.0%) incurred net healthcare losses; in 2008, 218 options (58.6%) incurred net healthcare losses. In the year under review, 121 (2008: 119), representing 54.3% (2008: 54.6%) of the loss-making options, were in open schemes and 102 (2008: 99), representing 45.7% (2008: 45.4%), were in restricted schemes.

The net healthcare losses per member per month (pmpm) in options with fewer than 2 500 members were 2.7 times greater (2008: 2.6) than in options with more than 2 500 members: R478.2 pmpm compared to R176.7 pmpm (2008: R375.7 pmpm against R144.2 pmpm).

It appears that loss-making benefit options with fewer than 2 500 members generally have higher contributions and claims than other options and also attract higher non-healthcare costs.

Table 34 shows option results by demographics. There were 106 options with an average age above the 32.9 years for options in open schemes, and 85 benefit options with beneficiaries younger than the average in open schemes.



In the restricted market, 101 options had beneficiaries with an average age higher than the 29.7 for all options in restricted schemes. Sixty-two options had younger beneficiaries.

As expected, the options covering older and sicker lives incurred greater deficits.

Table 34: Number of options by demographics

	Open schemes	Restricted schemes	Total
Options >= 32.9 years (average age in open schemes); >= 29.7 years (average age in restricted schemes)			
No. of options >= 32.9 years (open); >= 29.7 years (restricted)	106	101	207
NHC results pbpm >= - R28.9 (open); NHC results pbpm >= - R23.6 (restricted)	25	27	52
NHC results pbpm < - R28.9 (open); NHC results pbpm < - R23.6 (restricted)	81	74	155
Options < 32.9 years (average age in open schemes); < 29.7 years (average age in restricted schemes)			
No. of options < 32.9 years (open); < 29.7 years (restricted)	85	62	147
NHC results pbpm >= - R28.9 (open); NHC results pbpm >= - R23.6 (restricted)	45	34	79
NHC results pbpm < - R28.9 (open); NHC results pbpm < - R23.6 (restricted)	40	28	68

pbpm = per beneficiary per month  
NHC = Net Healthcare  
Average age per beneficiary in open options = 32.9 years  
Average age per beneficiary in restricted options = 29.7 years  
NHC results per beneficiary in open options = - R28.9  
NHC results per beneficiary in restricted options = - R23.6

# Administrator market

Figure 51 shows the market share of medical scheme administrators as well as self-administered medical schemes based on the average number of beneficiaries administered at the end of 2009.

Figure 51:Administrator market share 2009

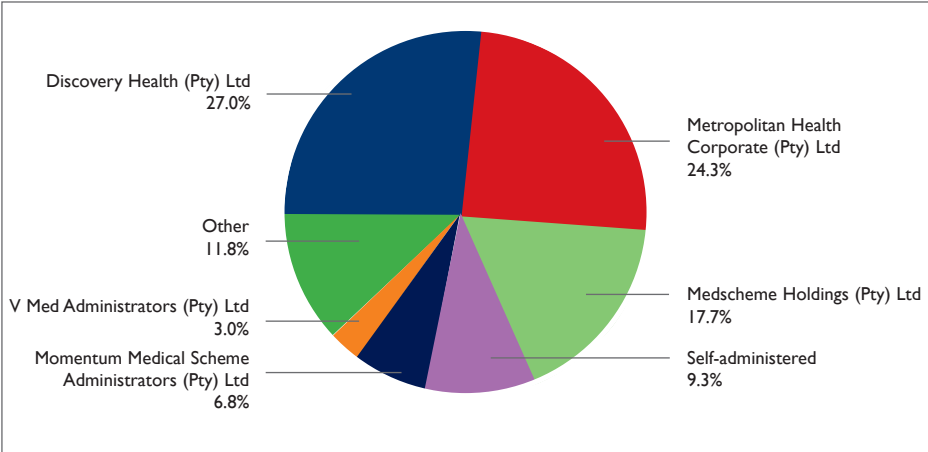
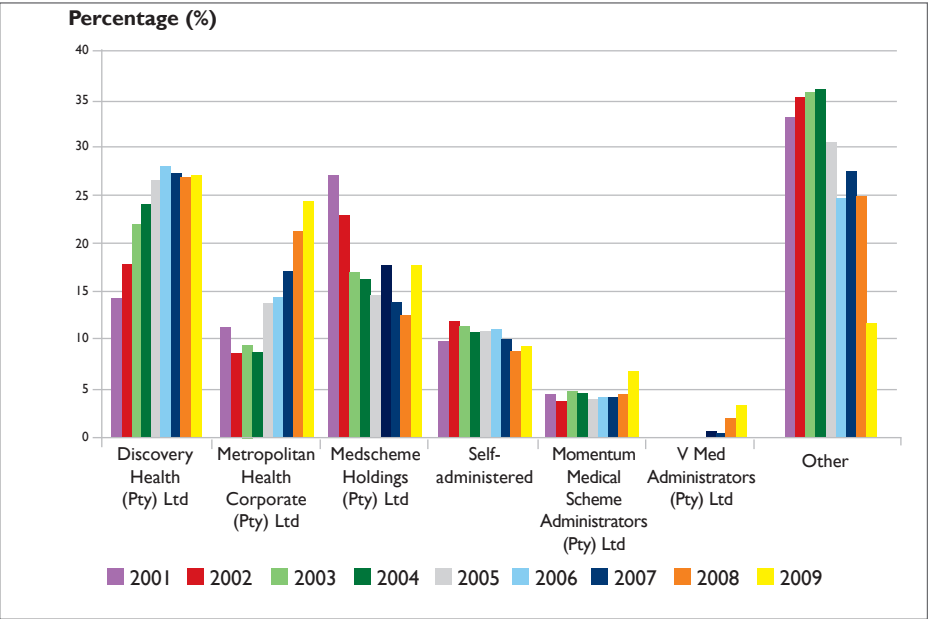


Figure 52 depicts the changes in market share of all medical schemes over the last nine years based on the average number of beneficiaries administered by the various parties at the end of each year.

Figure 52: Market share of largest administrators



Five third-party administrators dominate the market:

- Discovery Health (Pty) Ltd
- Metropolitan Health Corporate (Pty) Ltd
- Medscheme Holdings (Pty) Ltd
- Momentum Medical Scheme Administrators (Pty) Ltd
- V Med Administrators (Pty) Ltd

Together, they administer 87.0% of the market (excluding the self-administered schemes).  
Figures 53 and 54 indicate the changes in market share over the last nine years for open and restricted schemes respectively.

Figure 53: Open market share of largest administrators based on average number of beneficiaries

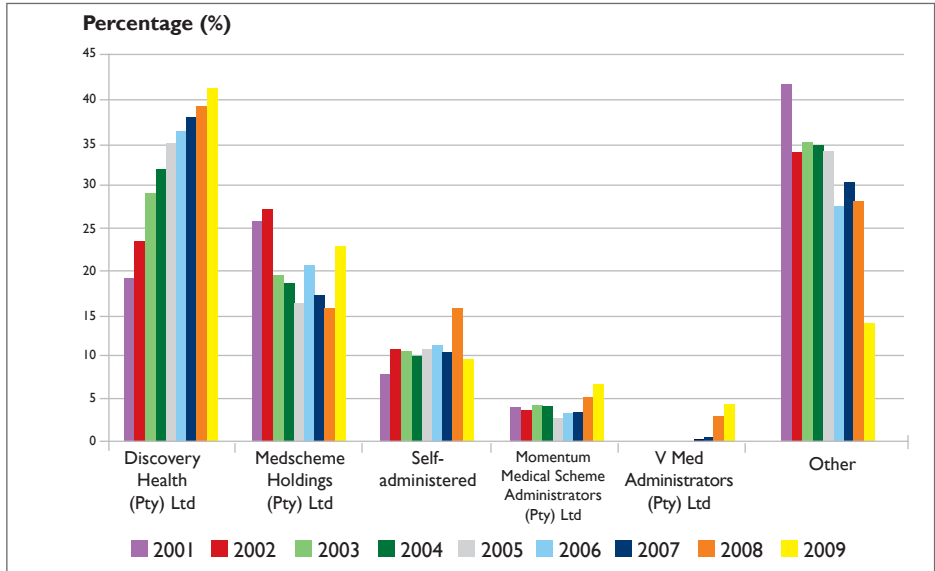
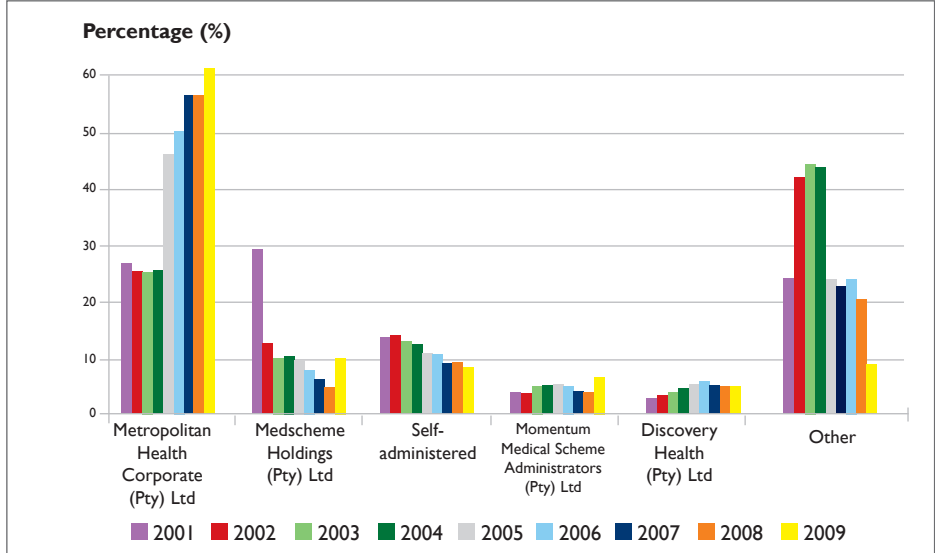


Figure 54: Restricted market share of largest administrators based on average number of beneficiaries



The share of administrator Discovery Health (Pty) Ltd of the open schemes market increased to 41.3% (2008: 39.6%); its share in the restricted schemes market decreased to 4.7% (2007: 4.8%). Medscheme Holdings (Pty) Ltd has the second-biggest share in both the open and restricted schemes administration market at 22.8% (2008: 16.0%) and 9.8% (2008: 6.2%) for the open and restricted market respectively. Medscheme acquired Lethimvula Healthcare (Pty) Ltd in 2009; the latter had earlier acquired the business of Old Mutual Healthcare (Pty) Ltd. Metropolitan Health Corporate (Pty) Ltd has the biggest share of the restricted schemes market at 60.9% (2008: 56.0%).

Despite their market dominance and the inherent benefits of economies of scale, the larger administrators do not appear to offer any cost advantages over their smaller rivals. Perhaps their size makes them less efficient and less responsive to clients' needs?

Table 35 shows the six administrators who had higher administration costs and fees than the industry average of administrators handling open schemes.

Table 35: Percentage deviation from industry average: open schemes (%)

	Gross administration costs	Administration fees paid*	Fees paid to administrators (administration + managed care)*
Discovery Health (Pty) Ltd	11.2	32.9	30.9
Private Health Administrators (a division of Sweidan Trust (Pty) Ltd)	43.9	20.0	15.4
Agility Global Health Solutions Africa	19.3	5.8	11.4
Momentum Medical Scheme Administrators (Pty) Ltd	(8.0)	(3.6)	(4.1)
Sanlam Healthcare Management (Pty) Ltd	21.8	(10.5)	(5.3)
Eternity Private Health Fund Administrators (Pty) Ltd	46.6	15.6	(7.5)

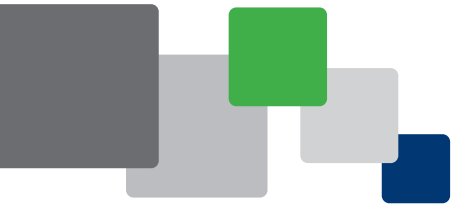
\* Excluding co-administration fees.

As for restricted schemes, Table 36 shows the six administrators with higher administration costs and fees than the industry average for restricted schemes.

Table 36: Percentage deviation from industry average: restricted schemes (%)

	Gross administration costs	Administration fees paid*	Fees paid to administrators (administration + managed care)*
Eternity Private Health Fund Administrators (Pty) Ltd	144.1	160.8	185.2
Allcare Administrators (Pty) Ltd	98.6	133.6	121.9
Discovery Health (Pty) Ltd	68.4	66.2	100.6
V Med Administrators (Pty) Ltd	51.4	55.3	100.2
Medscheme Holdings (Pty) Ltd	26.2	33.8	66.5
Momentum Medical Scheme Administrators (Pty) Ltd	25.2	33.6	53.8

\* Excluding co-administration fees.



Administrators and businesses associated with administrators often provide managed healthcare services. In many instances, these services are merely additional layers of administration costs with questionable benefits for the schemes themselves; we have included them in the “fees paid to administrators” figures where they were paid to the administrator or to any company in the administrator group.

Co-administration fees were excluded from “fees paid to administrators” as these fees could not be allocated to the administrators.

Tables 37 and 38 show administrator market share based on the average number of beneficiaries to whom services are being delivered by third-party administrators and medical schemes under self-administration. We also show the average cost of administration. Gross administration costs are costs charged to both risk pools and savings accounts. (Details per individual administrator are outlined in Annexure U.)

**Table 37: Administrator market share: open schemes 2009**

Name of administrator	No. of schemes	Bene- ficiaries	Gross administration costs		Administration fees paid*		Fees paid to administrators (administration + managed care)*		Gross contri- butions	Risk claims ratio
		Market share %	pabpm R	As % of GCI	pabpm R	As % of GCI	pabpm R	As % of GCI	pabpm R	%
Agility Global Health Solutions Africa	1	1.7	114.2	17.8	81.5	12.7	107.2	16.8	640.0	77.1
Allcare Administrators (Pty) Ltd	2	2.6	111.0	13.8	67.8	8.5	79.8	10.0	801.7	84.5
Discovery Health (Pty) Ltd	1	41.3	106.5	10.7	102.3	10.3	125.9	12.7	994.9	80.1
Eternity Private Health Fund Administrators (Pty) Ltd	1	0.1	140.4	8.6	89.0	5.4	89.0	5.4	1,640.0	91.1
HDS Medical (Pty) Ltd t/a Multimed Healthcare Administrators	-	-	-	-	-	-	-	-	-	-
Medscheme Holdings (Pty) Ltd	4	22.8	82.1	9.5	55.0	6.4	73.8	8.5	864.7	91.5
Metropolitan Health (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Metropolitan Health Corporate (Pty) Ltd	1	0.7	69.2	7.6	58.4	6.4	58.4	6.4	907.1	91.0
Momentum Medical Scheme Administrators (Pty) Ltd	4	6.9	88.1	9.2	74.2	7.7	92.3	9.6	960.8	89.3
Old Mutual Healthcare (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Private Health Administrators (a division of Sweidan Trust (Pty) Ltd)	1	0.4	137.8	13.6	92.4	9.1	111.0	10.9	1,013.9	78.8
Professional Medical Scheme Administrators (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Prosperity Health Managers (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Providence Healthcare Risk Managers (Pty) Ltd	2	0.3	63.1	8.8	45.4	6.3	54.2	7.5	721.1	86.5
Resolution Health (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Rowan Angel (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Sanlam Healthcare Management (Pty) Ltd	1	1.8	116.6	12.0	68.9	7.1	91.1	9.3	975.2	84.1
Sechaba Medical Solutions (Pty) Ltd	2	3.9	85.2	10.6	56.5	7.0	71.2	8.9	803.5	92.1
Self-administered	5	9.9	90.4	8.7	10.7	1.5	10.7	1.5	1,034.9	92.3
Sigma Health Fund Managers (Pty) Ltd	1	1.5	87.4	9.5	49.0	5.3	49.0	5.3	921.6	101.5
Status Medical Aid Administrators (Pty) Ltd	3	1.0	100.1	10.8	83.6	9.0	84.0	9.1	924.5	103.3
Thebe Ya Bophelo Healthcare Administrators (Pty) Ltd	1	0.3	51.3	10.8	40.7	8.6	56.7	12.0	474.3	81.4
V Med Administrators (Pty) Ltd	3	4.8	81.7	9.5	53.2	6.2	71.4	8.3	856.9	90.2
<b>Average</b>	<b>33</b>	<b>100.0</b>	<b>95.8</b>	<b>10.2</b>	<b>77.0</b>	<b>8.4</b>	<b>96.2</b>	<b>10.5</b>	<b>937.7</b>	<b>86.6</b>

pabpm = per average beneficiary per month

GCI = Gross Contribution Income

\* Excluding co-administration fees.

Table 38: Administrator market share: restricted schemes 2009

Name of administrator	No. of schemes	Bene- ficiaries	Gross administration costs		Administration fees paid*		Fees paid to administrators (administration + managed care)*		Gross contributions	Risk claims ratio
		Market share %	pabpm R	As % of GCI	pabpm R	As % of GCI	pabpm R	As % of GCI	pabpm R	%
Agility Global Health Solutions Africa	1	1.7	59.6	7.2	36.1	4.3	61.7	7.4	832.6	102.0
Allcare Administrators (Pty) Ltd	3	0.7	103.9	9.6	98.8	9.1	105.2	9.7	1,081.0	102.4
Discovery Health (Pty) Ltd	11	4.7	88.1	9.0	70.3	7.2	95.1	9.7	975.9	88.6
Eternity Private Health Fund Administrators (Pty) Ltd	1	1.3	127.7	11.0	110.3	9.5	135.2	11.7	1,158.0	86.9
HDS Medical (Pty) Ltd t/a Multimed Healthcare Administrators	-	-	-	-	-	-	-	-	-	-
Medscheme Holdings (Pty) Ltd	20	9.8	66.0	6.7	56.6	5.8	78.9	8.0	983.5	95.4
Metropolitan Health (Pty) Ltd	4	1.3	63.6	7.3	53.3	6.1	53.3	6.1	869.0	96.1
Metropolitan Health Corporate (Pty) Ltd	11	60.9	43.3	5.5	33.1	4.2	33.1	4.2	785.7	94.2
Momentum Medical Scheme Administrators (Pty) Ltd	8	6.7	65.5	7.4	56.5	6.4	72.9	8.2	886.1	92.0
Old Mutual Healthcare (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Private Health Administrators (a division of Sweidan Trust (Pty) Ltd)	-	-	-	-	-	-	-	-	-	-
Professional Medical Scheme Administrators (Pty) Ltd	1	2.0	93.1	10.4	60.5	6.7	70.6	7.8	899.5	91.8
Prosperity Health Managers (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Providence Healthcare Risk Managers (Pty) Ltd	3	1.2	67.5	8.0	48.0	5.7	69.4	8.2	841.5	94.7
Resolution Health (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Rowan Angel (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Sanlam Healthcare Management (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Sechaba Medical Solutions (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Self-administered	10	8.4	37.9	6.6	26.8	2.8	6.4	0.9	574.9	93.9
Sigma Health Fund Managers (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
Status Medical Aid Administrators (Pty) Ltd	3	0.9	57.3	7.7	49.0	6.5	49.2	6.6	748.5	95.8
Thebe Ya Bophelo Healthcare Administrators (Pty) Ltd	-	-	-	-	-	-	-	-	-	-
V Med Administrators (Pty) Ltd	1	0.4	79.2	7.1	65.7	5.9	94.9	8.5	1,111.3	91.0
<b>Average</b>	<b>77</b>	<b>100.0</b>	<b>52.3</b>	<b>6.4</b>	<b>42.2</b>	<b>5.0</b>	<b>47.4</b>	<b>5.7</b>	<b>816.0</b>	<b>93.9</b>

pabpm = per average beneficiary per month

GCI = Gross Contribution Income

\* Excluding co-administration fees.

A decade of resolving



“In the attitude of silence  
the soul finds the path  
in a clearer light, and what  
is elusive and deceptive  
**resolves** itself into crystal  
clearness. Our life is a long  
and arduous quest after  
Truth.”

#### Mahatma Gandhi

Political and spiritual leader  
of India; pioneer of the  
peaceful resistance movement

## Annexure A

### Compliance with submission of audited Annual Financial Statements and statutory returns

Section 37 of the Medical Schemes Act 131 of 1998 requires every medical scheme to submit its audited Annual Financial Statements and statutory returns to the Registrar of Medical Schemes by 30 April in respect of its financial year.

A number of faulty and incomplete returns have again delayed the processing of the data this year. We would appreciate better cooperation from schemes in this regard.

The following schemes submitted their documents after the deadline stipulated in the Act (see table). Section 66(3) requires that penalties be imposed on such schemes unless good cause can be shown that such penalties be waived.

Name of scheme	Outstanding documents	No. of days	Amount R	Comments
MBMed Medical Aid Fund	All	2	2 000	Penalised

The following should be noted in respect of the submitted audited Annual Financial Statements:

- Sizwe Medical Fund did not submit consolidated financial statements.
- Hosmed Medical Aid Scheme did not submit audited financial statements.
- A disclaimer of an audit opinion was issued in respect of the Annual Financial Statements of Protea Medical Aid Society. We subsequently rejected the financial statements.



# Annexure B

## Composition of the Council during 1 April 2009 – 31 March 2010

**Prof. William Pick (Chairperson)**  
Past President of the Medical Research Council (MRC)

**Ms Tracey Fortune (Deputy Chairperson)**  
Executive Director of the Non-Profit Consortium (NPC)

**Dr Zola Njongwe**  
Previously a Chief Director at the Gauteng Health Department;  
Vice Chancellor of the University of Johannesburg (since November 2009)

**Ms Zandile Mjoli**  
Senior General Manager: Resources & Strategy at Eskom;  
former member of a Board of Trustees

**Prof. Alan Rothberg**  
Head:Therapeutic School at the Faculty of Health Sciences  
at the University of the Witwatersrand;  
former Senior Executive in medical schemes administration

**Dr Kamy Chetty**  
Former Deputy Director-General at the National Department of Health (NDoH);  
Head of Department at the Gauteng Department of Health and Social  
Development (since March 2010)

**Ms Thembeke Gwagwa**  
Trade unionist; CEO of the Democratic Nursing Organisation of South Africa  
(DENOSA)

**Mr Archie Palane**  
Businessman; past Deputy Secretary General of the National Union  
of Mineworkers (NUM) (resigned in February 2010)

**Mr Tamsanqa (Thami) Bolani**  
Chairperson of the National Consumer Forum (NCF);  
serves on the Consumer Sector Board at the South African  
Bureau of Standards (SABS)

**Mr Rob Rusconi**  
Self-employed actuary; independent researcher and consultant

**Mr Kariem Hoosain**  
Partner at Mazars Moores Rowland; previously CEO  
of the Independent Regulatory Board for Auditors

**Mr Trevor Bailey**  
Practising Attorney at Trevor Bailey Attorneys

**Dr Rejoice Simelane**  
CEO of Ubuntu-Botho Investments (Pty) Ltd

## Annexure C: Statement of financial position as at 31 December 2009

	Registered schemes						Consolidated			Per member			Per beneficiary		
	Open schemes			Restricted schemes			2009	2008	%	2009	2008	%	2009	2008	%
	2009 R'000	2008 R'000	% change	2009 R'000	2008 R'000	% change	R'000	R'000	change	R	R	change	R	R	change
<b>Assets</b>															
<b>Non-current assets</b>	4,861,840	4,600,867	5.7	5,209,751	4,695,730	10.9	10,071,591	9,296,597	8.3	2,887.5	2,743.5	5.2	1,248.3	1,180.5	5.7
Property, plant and equipment	122,043	179,068	-31.8	26,716	26,876	-0.6	148,759	205,944	-27.8	76.8	113.7	-32.5	31.8	47.1	-32.4
Investments	4,721,031	4,380,879	7.8	5,181,721	4,668,605	11.0	9,902,752	9,049,484	9.4	3,036.3	3,547.3	-14.4	1,301.2	1,576.3	-17.5
Other non-current assets	18,766	40,920	-54.1	1,314	249	426.8	20,080	41,169	-51.2	80.0	163.2	-51.0	37.8	75.6	-50.0
<b>Current assets</b>	17,216,468	16,981,554	1.4	13,313,408	12,920,935	3.0	30,529,876	29,902,489	2.1	8,752.8	8,824.5	-0.8	3,783.8	3,797.2	-0.4
Inventories	-	-	-	1,751	1,284	36.4	1,751	1,284	36.4	37.2	26.1	42.5	16.7	12.0	38.9
Trade and other receivables	1,993,164	1,870,393	6.6	644,199	693,067	-7.1	2,637,363	2,563,460	2.9	756.1	756.5	-	326.9	325.5	0.4
Investments	7,595,009	6,605,462	15.0	3,796,478	3,869,096	-1.9	11,391,487	10,474,558	8.8	5,517.6	8,204.1	-32.7	2,407.9	3,542.1	-32.0
Cash and cash equivalents	7,608,074	8,504,984	-10.5	8,870,621	8,357,066	6.1	16,478,695	16,862,050	-2.3	4,724.4	4,976.1	-5.1	2,042.3	2,141.3	-4.6
Other current assets	20,221	715	2,728.3	359	422	-15.0	20,580	1,137	1,709.5	236.3	24.8	852.9	108.9	12.3	787.5
<b>Total assets</b>	22,078,308	21,582,421	2.3	18,523,159	17,616,665	5.1	40,601,467	39,199,086	3.6	11,640.3	11,568.0	0.6	5,032.1	4,977.8	1.1
<b>Funds and liabilities</b>															
<b>Members' funds</b>	15,510,469	15,103,681	2.7	13,931,115	12,990,107	7.2	29,441,584	28,093,788	4.8	8,440.8	8,290.7	1.8	3,649.0	3,567.5	2.3
Accumulated funds	14,997,861	14,719,455	1.9	12,949,616	12,289,336	5.4	27,947,477	27,008,791	3.5	8,012.4	7,970.5	0.5	3,463.8	3,429.8	1.0
Revaluation reserve: investments	475,176	355,367	33.7	637,487	366,998	73.7	1,112,663	722,365	54.0	776.6	544.1	42.7	351.1	244.7	43.5
Revaluation reserve: property, plant and equipment	33,911	24,645	37.6	4,986	4,837	3.1	38,897	29,482	31.9	230.3	212.7	8.3	99.7	91.1	9.5
Reserves set aside for specific purposes	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other reserves	-	-	-	339,026	328,936	3.1	339,026	328,936	3.1	12,064.5	9,554.3	26.3	5,545.7	4,354.9	27.3
Minority interest	3,521	4,214	-16.4	-	-	-	3,521	4,214	-16.4	111.5	136.2	-18.1	50.3	58.5	-14.0
<b>Non-current liabilities</b>	61,687	47,425	30.1	824,952	1,240,665	-33.5	886,639	1,288,090	-31.2	254.2	380.1	-33.1	109.9	163.6	-32.8
Borrowings	-	2,500	-100.0	1,000	1,000	-	1,000	3,500	-71.4	201.1	65.6	206.7	87.1	30.5	185.9
Other non-current liabilities	61,687	44,925	37.3	823,952	1,239,665	-33.5	885,639	1,284,590	-31.1	439.1	1,435.3	-69.4	185.8	586.3	-68.3
<b>Current liabilities</b>	6,506,152	6,431,315	1.2	3,767,092	3,385,893	11.3	10,273,244	9,817,208	4.6	2,945.3	2,897.1	1.7	1,273.3	1,246.7	2.1
Savings plan liability	2,783,054	2,793,845	-0.4	1,471,189	1,396,814	5.3	4,254,243	4,190,659	1.5	1,458.3	1,499.1	-2.7	639.9	656.1	-2.5
Trade and other payables	1,859,489	1,733,990	7.2	1,002,242	818,416	22.5	2,861,731	2,552,406	12.1	820.4	753.2	8.9	354.7	324.1	9.4
Provision for outstanding claims	1,863,609	1,903,480	-2.1	1,293,661	1,170,663	10.5	3,157,270	3,074,143	2.7	908.9	911.2	-0.3	392.3	391.4	0.2
<b>Total funds and liabilities</b>	22,078,308	21,582,421	2.3	18,523,159	17,616,665	5.1	40,601,467	39,199,086	3.6	11,640.3	11,568.0	0.6	5,032.1	4,977.8	1.1

Annexure C: Statement of financial position as at 31 December 2009

Notes

Prior year figures have been restated.  
Per member and per beneficiary figures were calculated only in respect of medical schemes with such balances.



## Annexure D: Statement of comprehensive income for the year ended 31 December 2009

	Registered schemes						Consolidated			pampm			pabpm		
	Open schemes			Restricted schemes											
	2009 R'000	2008 R'000	% change	2009 R'000	2008 R'000	% change	2009 R'000	2008 R'000	% change	2009 R	2008 R	% change	2009 R	2008 R	% change
Gross contribution income	54,354,174	49,003,457	10.9	30,509,043	25,102,103	21.5	84,863,217	74,105,560	14.5	2,059.1	1,867.5	10.3	890.0	801.0	11.1
Savings contribution income	(6,178,983)	(5,493,453)	-12.5	(1,552,551)	(1,428,781)	-8.7	(7,731,534)	(6,922,234)	-11.7	-240.9	-231.2	-4.2	-105.7	-100.9	-4.8
Net contribution income	48,175,191	43,510,004	10.7	28,956,492	23,673,322	22.3	77,131,683	67,183,326	14.8	1,871.5	1,693.1	10.5	808.9	726.2	11.4
Relevant healthcare expenditure	(41,704,540)	(36,591,543)	-14.0	(27,198,658)	(21,770,188)	-24.9	(68,903,198)	(58,361,731)	-18.1	-1,671.9	-1,470.7	-13.7	-722.6	-630.8	-14.6
Net claims incurred	(41,640,427)	(36,444,713)	-14.3	(27,218,925)	(21,848,783)	-24.6	(68,859,352)	(58,293,496)	-18.1	-1,670.8	-1,469.0	-13.7	-722.1	-630.1	-14.6
Net income/(expense) on risk transfer arrangements*	(64,113)	(146,830)	56.3	20,267	78,595	-74.2	(43,846)	(68,235)	35.7	-1.1	-1.7	35.3	-0.5	-0.7	28.6
Gross healthcare result	6,470,651	6,918,461	-6.5	1,757,834	1,903,134	-7.6	8,228,485	8,821,595	-6.7	199.7	222.3	-10.2	86.3	95.4	-9.5
Net income/(expenses) on commercial reinsurance	472	387	22.0	166	(1,885)	108.8	638	(1,498)	142.6	5.4	-11.6	146.6	2.4	-5.1	147.1
Managed healthcare: management services	(1,288,447)	(1,166,461)	-10.5	(647,110)	(509,882)	-26.9	(1,935,557)	(1,676,343)	-15.5	-47.5	-42.7	-11.2	-20.5	-18.3	-12.0
Brokers fees**	(1,170,021)	(1,145,015)	-2.2	(27,575)	(18,103)	-52.3	(1,197,596)	(1,163,118)	-3.0	-43.9	-44.6	1.6	-19.4	-19.3	-0.5
Administration expenditure	(5,551,246)	(5,105,100)	-8.7	(1,955,854)	(1,643,610)	-19.0	(7,507,100)	(6,748,710)	-11.2	-182.2	-170.1	-7.1	-78.7	-72.9	-8.0
Net impairment losses: trade and other receivables	(128,924)	(102,008)	-26.4	(47,706)	(42,577)	-12.0	(176,630)	(144,585)	-22.2	-4.3	-3.7	-16.2	-1.9	-1.6	-18.8
<b>Net healthcare result</b>	<b>(1,667,515)</b>	<b>(599,736)</b>	<b>-178.0</b>	<b>(920,245)</b>	<b>(312,923)</b>	<b>-194.1</b>	<b>(2,587,760)</b>	<b>(912,659)</b>	<b>-183.5</b>	<b>-62.8</b>	<b>-23.0</b>	<b>-173.0</b>	<b>-27.1</b>	<b>-9.9</b>	<b>-173.7</b>
Net impairment losses: other	(11,061)	(10,126)	-9.2	-	(26,972)	100.0	(11,061)	(37,098)	70.2	-3.4	-12.1	71.9	-1.2	-4.5	73.3
Other investment income	1,644,322	1,904,502	-13.7	1,153,935	1,403,558	-17.8	2,798,257	3,308,060	-15.4	67.9	83.5	-18.7	29.3	35.8	-18.2
Realised and unrealised gains/(losses)	303,801	104,411	191.0	376,542	(164,040)	329.5	680,343	(59,629)	1,241.0	17.7	-1.9	1,031.6	7.6	-0.8	1,050.0
Other income	66,632	154,967	-57.0	117,303	249,624	-53.0	183,935	404,591	-54.5	4.6	10.8	-57.4	2.0	4.6	-56.5
Own facility surplus/(deficit)	(129)	(125)	-2.6	18,902	24,577	-23.1	18,773	24,452	-23.2	19.3	22.5	-14.2	9.0	11.0	-18.2
Other expenditure	(362)	(659)	45.1	(56)	(135)	58.7	(418)	(794)	47.4	-0.1	-0.4	75.0	-0.1	-0.2	50.0
Finance costs	(46,187)	(98,999)	53.3	(64,873)	(77,077)	15.8	(111,060)	(176,076)	36.9	-4.5	-7.2	37.5	-2.0	-3.2	37.5
<b>Net surplus for the year (before consolidation)</b>	<b>289,501</b>	<b>1,454,235</b>	<b>-80.1</b>	<b>681,508</b>	<b>1,096,612</b>	<b>-37.9</b>	<b>971,009</b>	<b>2,550,847</b>	<b>-61.9</b>	<b>23.6</b>	<b>64.3</b>	<b>-63.3</b>	<b>10.2</b>	<b>27.6</b>	<b>-63.0</b>
Consolidation results	(7,138)	1,701	-519.6	-	822	-100.0	(7,138)	2,523	-383.0	-1.2	0.5	-340.0	-0.5	0.2	-350.0
<b>Net surplus for the year (after consolidation)</b>	<b>282,363</b>	<b>1,455,936</b>	<b>-80.6</b>	<b>681,508</b>	<b>1,097,434</b>	<b>-37.9</b>	<b>963,871</b>	<b>2,553,370</b>	<b>-62.3</b>	<b>23.4</b>	<b>64.3</b>	<b>-63.6</b>	<b>10.1</b>	<b>27.6</b>	<b>-63.4</b>
<b>Other comprehensive income</b>	<b>125,118</b>	<b>(20,607)</b>	<b>707.2</b>	<b>259,500</b>	<b>(1,704,332)</b>	<b>115.2</b>	<b>384,618</b>	<b>(1,724,939)</b>	<b>122.3</b>	<b>9.3</b>	<b>-43.5</b>	<b>121.4</b>	<b>4.0</b>	<b>-18.6</b>	<b>121.5</b>
Fair value adjustment on available-for-sale investments	365,589	(202,138)	280.9	338,695	(237,654)	242.5	704,284	(439,792)	260.1	49.3	-31.8	255.0	18.0	-11.6	255.2
Reclassification adjustment	(212,422)	(47,858)	-343.9	(69,806)	(29,560)	-136.2	(282,228)	(77,418)	-264.6	-49.3	-24.0	-105.4	-14.1	-5.6	-151.8
Land and buildings revaluation	12,116	4,087	196.4	-	-	-	12,116	4,087	196.4	6.9	3.4	102.9	3.0	1.6	87.5
Other	(40,165)	225,302	-117.8	(9,389)	(1,437,118)	99.3	(49,554)	(1,211,816)	95.9	-6.3	-61.3	89.7	-5.2	-27.4	81.0
<b>Total comprehensive income for the year</b>	<b>407,481</b>	<b>1,435,329</b>	<b>-71.6</b>	<b>941,008</b>	<b>(606,898)</b>	<b>255.1</b>	<b>1,348,489</b>	<b>828,431</b>	<b>62.8</b>	<b>32.7</b>	<b>20.9</b>	<b>56.5</b>	<b>14.1</b>	<b>8.7</b>	<b>62.1</b>

Annexure D: Statement of comprehensive income for the year ended 31 December 2009

Notes

Prior year figures have been restated.

pampm = per average member per month (in respect of those medical schemes who incurred such income or expenditure)

pabpm = per average beneficiary per month (in respect of those medical schemes who incurred such income or expenditure)

\* Net income/(expense) on risk transfer arrangements represents the difference between capitation fees and the estimated recoveries in respect of risk transfer arrangements. This amount indicates whether the medical scheme derived any value for money from these arrangements.

\*\* Including distribution costs

**Annexure E:** Consolidated statement of changes in funds and reserves for the year ended 31 December 2009

	Registered schemes						Consolidated			Per member			Per beneficiary		
	Open schemes			Restricted schemes			2009	2008	%	2009	2008	%	2009	2008	%
	2009 R'000	2008 R'000	% change	2009 R'000	2008 R'000	% change	R'000	R'000	change	R	R	change	R	R	change
<b>Accumulated funds</b>															
Balances at the beginning of the year	14,719,455	13,027,085	13.0	12,289,336	11,479,899	7.1	27,008,791	24,506,984	10.2	7,743.3	7,232.2	7.1	3,347.4	3,112.1	7.6
- As previously reported	14,719,455	13,027,085	13.0	12,289,336	11,484,315	7.0	27,008,791	24,511,400	10.2	7,743.3	7,233.5	7.0	3,347.4	3,112.6	7.5
- Prior year adjustment	-	-	-	-	(4,416)	100.0	-	(4,416)	100.0	-	-1.3	100.0	-	-0.6	100.0
Surplus/(deficit) for the year	282,363	1,455,936	-80.6	681,508	1,097,434	-37.9	963,871	2,553,370	-62.3	276.3	753.5	-63.3	119.5	324.2	-63.2
Transfer to/(from) accumulated funds	3,126	197,362	-98.4	2,824	(191,600)	101.5	5,950	5,762	3.3	1.7	1.7	0.3	0.7	0.7	0.8
- Due to amalgamation	(0)	187,200	-100.0	-	(187,200)	100.0	(0)	0	-100.4	-0.0	0.0	-100.4	-0.0	0.0	-100.4
- Due to re-measurement of investments and property, plant and equipment	2,850	10,162	-72.0	-	(5,591)	100.0	2,850	4,571	-37.6	0.8	1.3	-39.4	0.4	0.6	-39.1
- Other transfers	276	-	100.0	2,824	1,191	137.1	3,100	1,191	160.3	0.9	0.4	152.8	0.4	0.2	154.0
Other	(7,083)	39,072	-118.1	(24,052)	(96,397)	75.0	(31,135)	(57,325)	45.7	-8.9	-16.9	47.2	-3.9	-7.3	47.0
<b>Balance at the end of the year</b>	<b>14,997,861</b>	<b>14,719,455</b>	<b>1.9</b>	<b>12,949,616</b>	<b>12,289,336</b>	<b>5.4</b>	<b>27,947,477</b>	<b>27,008,791</b>	<b>3.5</b>	<b>8,012.4</b>	<b>7,970.5</b>	<b>0.5</b>	<b>3,463.8</b>	<b>3,429.8</b>	<b>1.0</b>
<b>Revaluation reserve (investments)</b>															
Balances at the beginning of the year	355,367	606,333	-41.4	366,998	655,126	-44.0	722,365	1,261,459	-42.7	504.2	950.2	-46.9	228.0	427.3	-46.7
- As previously reported	355,367	606,333	-41.4	366,998	655,842	-44.0	722,365	1,262,175	-42.8	504.2	950.8	-47.0	228.0	427.5	-46.7
- Prior year adjustment	-	-	-	-	(716)	100.0	-	(716)	100.0	-	-0.5	100.0	-	-0.2	100.0
Unrealised gains/(losses) on revaluation of investments	365,589	(202,138)	280.9	338,695	(237,654)	242.5	704,284	(439,792)	260.1	491.5	-331.3	248.4	222.2	-149.0	249.2
Realised (gains)/losses on derecognition of investments	(212,422)	(47,858)	-343.9	(69,806)	(29,560)	-136.2	(282,228)	(77,418)	-264.6	-197.0	-58.3	-237.8	-89.1	-26.2	-239.6
Revaluation adjustment	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Transfer (to)/from reserves	-	-	-	-	(19,633)	100.0	-	(19,633)	100.0	-	-14.8	100.0	-	-6.6	100.0
Other	(33,358)	(970)	-3,340.7	1,600	(1,281)	224.9	(31,760)	(2,251)	-1,310.9	-22.2	-1.7	-1,207.2	-10.0	-0.8	-1,214.4
<b>Balance at the end of the year</b>	<b>475,176</b>	<b>355,367</b>	<b>33.7</b>	<b>637,487</b>	<b>366,998</b>	<b>73.7</b>	<b>1,112,661</b>	<b>722,365</b>	<b>54.0</b>	<b>776.6</b>	<b>544.1</b>	<b>42.7</b>	<b>351.1</b>	<b>244.7</b>	<b>43.5</b>

## Annexure E: Consolidated statement of changes in funds and reserves for the year ended 31 December 2009

	Open schemes			Registered schemes			Consolidated			Per member			Per beneficiary		
	2009 R'000	2008 R'000	% change	2009 R'000	2008 R'000	% change	2009 R'000	2008 R'000	% change	2009 R	2008 R	% change	2009 R	2008 R	% change
<b>Revaluation reserve (property, plant and equipment)</b>															
Balances at the beginning of the year	24,645	30,720	-19.8	4,837	4,837	-	29,482	35,557	-17.1	174.6	256.5	-31.9	75.6	109.9	-31.2
- As previously reported	24,645	30,720	-19.8	4,837	4,837	-	29,482	35,557	-17.1	174.6	256.5	-31.9	75.6	109.9	-31.2
- Prior year adjustment	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Unrealised gains/(losses) on re-measurement of property, plant and equipment	12,116	4,087	196.4	-	-	-	12,116	4,087	196.4	71.7	29.5	143.3	31.1	12.6	145.9
Revaluation adjustment	-	-	-	149	-	100.0	149	-	100.0	0.9	-	100.0	0.4	-	100.0
Transfer (to)/from reserves	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other	(2,850)	(10,162)	72.0	-	-	-	(2,850)	(10,162)	72.0	-16.9	-73.3	77.0	-7.3	-31.4	76.7
<b>Balance at the end of the year</b>	<b>33,911</b>	<b>24,645</b>	<b>37.6</b>	<b>4,986</b>	<b>4,837</b>	<b>3.1</b>	<b>38,897</b>	<b>29,482</b>	<b>31.9</b>	<b>230.3</b>	<b>212.7</b>	<b>8.3</b>	<b>99.7</b>	<b>91.1</b>	<b>9.5</b>
<b>Reserves set aside for specific purposes</b>															
Balances at the beginning of the year	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
- As previously reported	-	-	-	-	745,861	-100.0	-	745,861	-100.0	-	29,542.6	-100.0	-	15,076.1	-100.0
- Prior year adjustment	-	-	-	-	(745,861)	100.0	-	(745,861)	100.0	-	-29,542.6	100.0	-	-15,076.1	100.0
Transfer (to)/from reserves	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Balance at the end of the year</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Other reserves</b>															
Balances at the beginning of the year	-	-	-	328,936	706,151	-53.4	328,936	706,151	-53.4	11,705.5	20,510.9	-42.9	5,380.7	9,349.0	-42.4
- As previously reported	-	-	-	328,936	706,151	-53.4	328,936	706,151	-53.4	11,705.5	20,510.9	-42.9	5,380.7	9,349.0	-42.4
- Prior year adjustment	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Transfer (to)/from reserves	-	-	-	(4,770)	(2,639)	-80.8	(4,770)	(2,639)	-80.8	-169.7	-76.6	-121.4	-78.0	-34.9	-123.3
Other	-	-	-	14,860	(374,576)	104.0	14,860	(374,576)	104.0	528.8	-10,880.0	104.9	243.1	-4,959.2	104.9
<b>Balance at the end of the year</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>339,026</b>	<b>328,936</b>	<b>3.1</b>	<b>339,026</b>	<b>328,936</b>	<b>3.1</b>	<b>12,064.6</b>	<b>9,554.3</b>	<b>26.3</b>	<b>5,545.7</b>	<b>4,354.9</b>	<b>27.3</b>

### Notes

Prior year figures have been restated.

NC = Not Comparable

Per member and per beneficiary figures were calculated only in respect of those medical schemes with such reserves.





## Annexure F: Consolidated membership analysis for the year ended 31 December 2009

Members			Dependants			Beneficiaries					
2009	2008	% change	2009	2008	% change	2009	2008	% change			
Membership as at 31 December 2009											
Registered schemes	3,488,009	3,388,582	2.9	4,580,496	4,486,244	2.1	8,068,505	7,874,826	2.5		
- Open schemes	2,144,369	2,136,960	0.3	2,670,965	2,751,946	-2.9	4,815,334	4,888,906	-1.5		
- Restricted schemes	1,343,640	1,251,622	7.4	1,909,531	1,734,298	10.1	3,253,171	2,985,920	9.0		
Total membership	3,488,009	3,388,582	2.9	4,580,496	4,486,244	2.1	8,068,505	7,874,826	2.5		
Average membership for the year											
Registered schemes	3,434,445	3,306,811	3.9	4,511,762	4,402,886	2.5	7,946,207	7,709,697	3.1		
- Open schemes	2,137,300	2,107,801	1.4	2,693,336	2,758,408	-2.4	4,830,636	4,866,209	-0.7		
- Restricted schemes	1,297,145	1,199,010	8.2	1,818,426	1,644,478	10.6	3,115,571	2,843,488	9.6		
Average membership	3,434,445	3,306,811	3.9	4,511,762	4,402,886	2.5	7,946,207	7,709,697	3.1		
Membership per province as at 31 December 2009		2009 % of total			2009 % of total						
Gauteng	1,304,764	1,266,034	37.4	1,605,191	1,575,300	35.0	2,909,955	2,841,334	36.1		
Limpopo	147,135	141,343	4.2	232,294	224,567	5.1	379,429	365,910	4.7		
Mpumalanga	218,719	215,833	6.3	334,782	328,500	7.3	553,501	544,333	6.9		
North West	189,501	183,693	5.4	251,410	241,705	5.5	440,911	425,398	5.5		
Free State	160,341	154,496	4.6	219,589	211,865	4.8	379,930	366,361	4.7		
KwaZulu-Natal	523,226	507,468	15.0	710,714	696,806	15.5	1,233,940	1,204,274	15.3		
Western Cape	582,094	565,749	16.7	712,892	699,722	15.6	1,294,986	1,265,471	16.0		
Eastern Cape	286,308	279,077	8.2	404,311	398,401	8.8	690,619	677,478	8.6		
Northern Cape	67,816	66,812	1.9	100,895	99,707	2.2	168,711	166,519	2.1		
Outside the Republic	8,105	8,077	0.2	8,418	9,671	0.2	16,523	17,748	0.2		
			3,488,009	3,388,582	100.0	4,580,496	4,486,244	100.0	8,068,505	7,874,826	100.0
Average number of dependants per average member	1.3	1.3									
Overall pensioner ratio	6.5%	6.2%									
- Open schemes	7.3%	6.7%									
- Restricted schemes	5.3%	5.5%									

Annexure F: Consolidated membership analysis for the year ended 31 December 2009

	Members			Dependants			Beneficiaries		
	2009	2008	% change	2009	2008	% change	2009	2008	% change
Average age per beneficiary	31.6	31.5							
- Open schemes	32.9	32.6							
- Restricted schemes	29.7	29.8							

## Annexure G: Utilisation of services for the year ended 31 December 2009

					Utilisation per 1 000 beneficiaries																		
		2009		2008			2009		2008			2009		2008			2009		2008				
Open schemes	Restricted schemes	Consolidated	Consolidated		Open schemes	Restricted schemes	Consolidated	Consolidated	Open schemes	Restricted schemes	Consolidated	Consolidated		Open schemes	Restricted schemes	Consolidated	Consolidated						
PRIVATE FACILITIES					PRIVATE PROVIDERS					BURDEN OF DISEASE													
Number of:					Beneficiaries visiting a provider once a year					Chronic total number of visits to a provider													
Beneficiaries admitted to hospitals	197.3	187.1	193.2	179.4	General practitioners	729.6	755.1	739.9	731.0	2,867.8	3,289.6	3,037.3	3,157.0	Hypertension	113.3	99.8	107.9	105.6					
Beneficiaries' days in hospital	704.7	1151.2	884.1	833.0	Dentists	213.4	244.1	225.7	216.1	442.9	510.7	470.1	469.7	Hyperlipidaemia	52.8	42.2	48.5	45.6					
Admissions	275.2	288.1	280.4	236.0	Private nurses	8.0	10.1	8.8	7.1	29.1	35.5	31.6	27.0	Diabetes Mellitus Type 2	29.2	28.4	28.9	26.9					
Beneficiaries admitted to hospitals for PMBs	101.0	89.8	96.5	91.1	Medical specialists									Asthma	28.9	23.6	26.8	26.6					
Beneficiaries admitted to day clinics and operating theatres	8.7	7.5	8.3	7.9	Dermatologists	34.4	25.4	30.8	30.1	53.0	40.1	47.8	47.4	Hypothyroidism	19.1	16.3	18.0	16.7					
Beneficiaries admitted to ICU	8.0	7.9	8.0	7.1	Gynaecologists	79.3	68.5	75.0	75.2	213.8	199.9	208.2	213.3	Coronary Artery Disease	16.9	11.9	14.9	14.9					
High-care ward	19.5	14.9	17.6	15.3	Pulmonologists	5.4	1.7	3.9	5.2	21.2	7.5	15.7	20.6	HIV	9.6	8.3	9.1	8.1					
General ward	157.2	179.5	166.2	158.3	Physicians	60.6	58.5	59.7	52.9	311.7	319.2	314.7	271.2	Epilepsy	7.8	6.1	7.1	6.9					
Pregnancies	14.4	16.0	15.1	16.5	Gastroenterologists	6.7	2.5	5.0	6.3	19.3	7.4	14.5	18.6	Diabetes Mellitus Type I	7.3	4.4	6.2	6.7					
Births	14.0	14.3	14.1	16.2	Neurologists	10.9	7.9	9.7	9.8	30.6	23.3	27.7	27.2	Cardiac failure	5.0	7.4	6.0	5.9					
Live births	8.9	5.8	7.7	10.4	Cardiologists	19.4	8.2	14.9	16.8	51.6	21.3	39.5	46.3	Dysrhythmias	5.7	3.1	4.7	4.6					
Births to women between 12 and 18 years old	0.2	0.4	0.3	0.2	Psychiatrists	17.0	15.3	16.3	15.8	86.0	83.2	84.9	78.7	Glaucoma	4.6	3.4	4.1	3.9					
Caesarian sections	9.7	9.1	9.5	10.4	Medical oncologists	1.8	0.5	1.3	1.1	11.4	4.4	8.6	8.5	Bipolar Mood Disorder	4.6	3.1	4.0	3.4					
Beneficiaries admitted for dialysis	21.7	5.3	15.1	20.6	Neurosurgeons	10.1	7.6	9.1	9.1	29.3	22.9	26.8	26.6	Rheumatoid Arthritis	4.2	3.4	3.8	3.8					
Hospital networks	78.8	3.4	48.5	42.9	Nuclear medicine	3.4	2.1	2.9	2.7	3.9	2.4	3.3	3.1	Chronic Obstructive	3.2	2.5	2.9	3.3					
Primary care networks	81.9	266.8	156.2	105.1	Ophthalmologists	38.9	31.0	35.7	35.8	76.4	59.6	69.7	69.2	Pulmonary Disease									
Selected medical investigations	Number of:				Clinical haematology	1.4	0.3	0.9	0.5	6.0	2.2	4.5	4.6	Cardiomyopathy Disease	2.5	1.5	2.1	1.5					
					Orthopaedic surgeon	43.4	32.9	39.1	39.5	97.6	75.9	88.9	90.7	Parkinson's Disease	1.3	1.0	1.2	1.1					
					Otorhinolaryngologists	32.6	25.2	29.6	29.8	59.6	46.4	54.3	54.1	Chronic Renal Disease	1.1	0.8	1.0	1.1					
					Rheumatology	1.7	0.6	1.3	1.5	4.2	1.6	3.2	4.0	Ulcerative Colitis	0.9	0.6	0.8	0.8					
					Paediatricians	31.2	50.7	39.0	51.8	215.5	200.5	209.5	199.7	Schizophrenia	0.8	0.6	0.7	0.7					
					Paediatric cardiologists	1.0	0.3	0.7	1.0	2.3	0.8	1.7	2.5	Multiple Sclerosis	0.3	0.9	0.6	0.2					
					Specialist physical medicine	0.1	0.2	0.1	0.2	0.4	0.8	0.5	1.1	Systematic Lupus	0.6	0.4	0.5	0.5					
					Plastic & reconstructive surgeons	5.0	3.0	4.2	4.0	9.5	6.0	8.1	8.3	Erythromatosis									
					Radiation oncology	5.6	3.8	4.9	4.7	39.4	27.1	34.4	34.0	Crohn's Disease	0.5	0.3	0.4	0.5					
					Surgeons	48.1	37.9	44.0	43.5	130.3	104.3	119.	116.8	Bronchiectasis	0.2	0.1	0.2	0.2					
Beneficiaries receiving MRI and CT scans	20.0	21.2	20.5	18.7	Thoracic surgeons	2.9	2.4	2.7	2.7	15.2	12.0	13.9	13.3	Addison's Disease	0.1	0.1	0.1	0.1					
MRI and CT scans administered	47.4	54.9	50.4	45.2	Urologists	23.7	17.6	21.2	20.8	53.2	40.1	47.9	47.7	Diabetes Insipidus	0.1	0.0	0.1	0.1					
Beneficiaries receiving PET scans	0.2	0.1	0.1	0.2										Haemophilia	0.04	0.02	0.03	0.03					
PET scans administered	0.2	0.1	0.2	0.4																			
Beneficiaries receiving angiograms	2.1	2.7	2.3	2.2																			
Angiograms administered	3.7	6.3	4.7	4.4																			
Bone density scans	2.1	1.6	1.9	4.4																			
Bone density scans administered	12.3	1.8	8.1	5.8																			

## Annexure G: Utilisation of services for the year ended 31 December 2009

					Utilisation per 1 000 beneficiaries								
					Open schemes	2009 Restricted schemes	Consolidated	2008 Consolidated					
					Open schemes	2009 Restricted schemes	Consolidated	2008 Consolidated	Open schemes	2009 Restricted schemes	Consolidated	2008 Consolidated	
PRIVATE FACILITIES					PRIVATE PROVIDERS								
Number of:					Beneficiaries visiting a provider once a year					Total number of visits to a provider			
Preventive health					Clinical support specialists								
Number of:													
Mammograms paid for	10.0	6.9	8.7	16.3	Anaesthetists	94.5	71.4	85.2	83.8	128.8	94.9	115.2	114.5
Pap smears paid for	23.4	17.1	20.8	35.8	Radiologists	225.7	186.9	210.1	206.4	411.4	343.2	384.0	374.8
					Pathologists	326.9	289.4	311.8	289.1	919.0	849.9	891.2	814.2
					Other	32.9	3.1	20.9	27.9	134.6	10.9	84.9	103.6
Mortality					Dental specialists								
Number of deaths													
	1.2	3.8	2.2	2.3	Dental therapists	8.1	24.5	14.7	13.4	12.9	36.1	22.2	20.8
					Dental technicians	1.5	2.4	1.9	0.5	2.1	3.9	2.8	1.4
PUBLIC FACILITIES					Maxilla, facial and oral surgeons								
Beneficiaries admitted to hospitals	5.1	16.1	9.5	8.6	Orthodontists	10.2	8.2	9.4	9.6	55.0	43.4	50.3	51.5
Beneficiaries' days in hospital	7.7	62.8	29.8	30.7	Periodontists	2.2	1.1	1.8	1.9	4.7	2.3	3.7	3.9
Admissions	9.2	31.9	18.3	5.6	Prosthodontists	1.4	0.9	1.2	1.2	3.5	1.9	2.9	2.9
Beneficiaries admitted to hospitals for PMBs	4.0	6.8	5.1	3.8	Supplementary & allied health professionals								
Beneficiaries admitted to ICU	0.8	0.0	0.5	0.1	Art therapists	0.0	1.0	0.4	0.1	0.3	1.3	0.7	0.3
High-care ward	0.8	0.1	0.5	0.1	Audiologists	11.1	9.3	10.3	9.3	46.3	27.7	38.8	36.2
General ward	3.3	1.5	2.6	1.7	Biokinetics	6.1	9.1	7.3	5.2	42.2	17.2	32.2	28.3
Pregnancies	0.9	0.4	0.7	0.2	Clinical technologists	16.5	14.4	15.7	15.7	81.9	62.1	74.0	63.7
Births	0.9	0.3	0.7	0.2	Dieticians	11.9	10.7	11.4	11.1	31.1	26.2	29.1	27.9
Births to women between 12 and 18 years old	0.0	0.0	0.0	0.0	Hearing aid acousticians	1.1	0.9	1.0	1.0	1.2	1.0	1.1	1.1
Live births	0.8	0.2	0.6	0.1	Medical scientists	0.2	0.0	0.1	0.0	0.3	0.0	0.2	0.0
Caesarian sections	0.0	0.1	0.1	0.1	Occupational therapists	8.2	7.5	7.9	7.5	67.8	48.7	60.1	56.8
Beneficiaries admitted for dialysis	0.1	1.3	0.6	0.2	Optometrists	156.9	179.0	165.8	152.8	196.6	205.5	200.2	184.8
Selected medical investigations					Orthoptists	2.1	1.5	1.9	0.4	2.5	2.3	2.4	0.6
Number of:					Pharmacists								
Beneficiaries receiving MRI and CT scans	0.3	0.6	0.4	1.0	Physiotherapists	91.9	80.6	87.4	85.9	514.6	400.8	468.9	460.9
MRI and CT scans administered	0.7	1.4	0.9	1.2	Podiatrists	7.7	4.7	6.5	6.5	16.6	9.1	13.6	13.7
Beneficiaries receiving PET scans	0.1	0.0	0.1	0.0	Psychologists	30.3	28.6	29.6	29.4	150.9	120.4	138.7	135.0
PET scans administered	0.8	0.0	0.5	0.0	Radiographers	9.2	9.2	9.2	7.9	10.7	11.4	11.0	9.5
Beneficiaries receiving angiograms	0.0	0.1	0.0	0.0									
Angiograms administered	0.2	0.1	0.2	0.1									
Bone density scans	0.1	0.0	0.1	0.0									
Bone density scans administered	0.8	0.0	0.5	0.0									



## Annexure G: Utilisation of services for the year ended 31 December 2009

					Utilisation per 1 000 beneficiaries								
		2009		2008				2009		2008			
Open schemes	Restricted schemes	Consolidated	Consolidated		Open schemes	Restricted schemes	Consolidated	Consolidated	Open schemes	Restricted schemes	Consolidated	Consolidated	
PRIVATE FACILITIES					PRIVATE PROVIDERS								
Number of:					Beneficiaries visiting a provider once a year					Total number of visits to a provider			
Preventive health					Supplementary & allied health professionals continued								
Number of:													
Mammograms paid for	1.3	0.0	0.8	1.8	Private nurses	8.3	5.5	7.1	6.2	29.5	19.8	25.6	22.7
Pap smears paid for	1.4	0.0	0.8	0.0	Social workers	2.3	2.1	2.2	2.1	10.9	6.6	9.2	9.2
					Speech therapists	6.0	4.9	5.5	4.2	17.2	15.1	16.3	12.2
Mortality					Acupuncture and Chinese medicine	0.2	0.1	0.2	0.1	0.7	0.6	0.7	0.3
Number of deaths	0.0	0.3	0.1	0.1	Ayurvedic practitioners	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
					Chiropractor osteopaths	14.5	6.6	11.3	10.9	58.5	23.4	44.4	43.0
					Homeopaths	17.9	4.2	12.4	7.4	31.1	9.6	22.5	17.3
					Naturopath and phytotherapists	0.0	4.0	1.7	0.4	0.1	36.6	14.7	2.8
					Therapeutic massage, aromaherapy & reflexology	0.1	0.0	0.0	0.0	0.2	0.0	0.1	0.1
					Other	3.9	3.9	3.9	7.6	10.6	7.9	9.5	12.4
					Other benefits								
					Ambulance services	0.3	1.0	0.6	0.4	1.5	1.1	1.3	0.5
					Ambulance services intermediate	0.4	0.4	0.4	0.4	1.3	0.5	1.0	0.4
					Ambulance services advanced	7.2	3.0	5.5	5.3	9.1	4.1	7.1	6.8
					Blood courier	0.2	0.0	0.1	0.0	0.6	0.0	0.4	0.0
					Blood transfusion services	8.4	7.0	7.9	7.4	17.0	32.4	23.2	19.4
					Home oxygen	1.3	0.9	1.1	1.2	8.8	5.0	7.2	7.6
					Appliances	6.7	13.3	9.4	8.1	11.0	19.3	14.3	13.3
					Prostheses	6.8	11.0	8.5	6.2	7.9	19.5	12.6	9.0
					Clinical services other	7.8	2.5	5.6	5.1	14.5	5.9	11.1	9.6
					Community health services	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.0
					Drug & alcohol rehabilitation	0.5	0.6	0.6	0.5	5.3	1.3	3.7	1.7
					Group practice	11.0	9.5	10.4	9.3	36.1	52.3	42.6	39.0
					Hospice	0.4	0.2	0.3	0.3	1.6	0.9	1.3	1.3

## Annexure G: Utilisation of services for the year ended 31 December 2009

				Utilisation per 1 000 beneficiaries							



## Annexure H: Total benefits paid for the year ended 31 December 2009

Open schemes					Restricted schemes				Consolidated				pabpa		
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
<b>General practitioners</b>	<b>3,044,236</b>	<b>6.4</b>	<b>3,031,019</b>	<b>0.4</b>	<b>2,630,121</b>	<b>9.2</b>	<b>2,203,990</b>	<b>19.3</b>	<b>5,674,357</b>	<b>7.4</b>	<b>5,235,009</b>	<b>8.4</b>	<b>714.1</b>	<b>679.0</b>	<b>5.2</b>
<b>Medical specialists</b>	<b>11,006,592</b>	<b>23.0</b>	<b>9,391,061</b>	<b>17.2</b>	<b>5,716,980</b>	<b>20.0</b>	<b>4,654,191</b>	<b>22.8</b>	<b>16,723,572</b>	<b>21.9</b>	<b>14,045,252</b>	<b>19.1</b>	<b>2,104.6</b>	<b>1,821.8</b>	<b>15.5</b>
Dermatologists	90,317	0.2	77,530		42,210	0.1	36,223		132,527	0.2	113,752		16.7	14.8	
Gynaecologists	719,281	1.5	648,654		413,686	1.5	343,567		1,132,967	1.5	992,221		142.6	128.7	
Pulmonologists	63,738	0.1	59,986		12,459	0.0	24,064		76,197	0.1	84,049		9.6	10.9	
Physicians	652,553	1.4	516,141		432,905	1.5	263,992		1,085,458	1.4	780,133		136.6	101.2	
Gastroenterologists	55,244	0.1	49,311		11,894	0.0	22,668		67,138	0.1	71,979		8.4	9.3	
Neurologists	90,331	0.2	79,792		43,545	0.2	38,420		133,877	0.2	118,212		16.8	15.3	
Cardiologists	294,655	0.6	248,965		72,113	0.3	108,101		366,768	0.5	357,066		46.2	46.3	
Psychiatrists	230,640	0.5	184,020		147,946	0.5	110,974		378,586	0.5	294,994		47.6	38.3	
Medical oncologists	64,894	0.1	60,913		13,220	0.0	17,007		78,114	0.1	77,920		9.8	10.1	
Neurosurgeons	209,248	0.4	175,994		95,887	0.3	78,733		305,135	0.4	254,727		38.4	33.0	
Nuclear medicine	58,129	0.1	47,962		25,353	0.1	21,278		83,482	0.1	69,240		10.5	9.0	
Ophthalmologists	495,013	1.0	407,236		232,923	0.8	196,375		727,936	1.0	603,611		91.6	78.3	
Clinical haematology	14,182	0.0	14,244		3,346	0.0	5,643		17,528	0.0	19,887		2.2	2.6	
Orthopaedic surgeons	651,132	1.4	533,713		276,683	1.0	226,295		927,815	1.2	760,007		116.8	98.6	
Otorhinolaryngologists	205,958	0.4	173,973		98,301	0.3	81,676		304,259	0.4	255,649		38.3	33.2	
Rheumatology	8,324	0.0	7,050		2,081	0.0	3,562		10,405	0.0	10,612		1.3	1.4	
Paediatricians	403,531	0.8	348,305		239,805	0.8	183,186		643,335	0.8	531,492		81.0	68.9	
Paediatric cardiologists	12,482	0.0	13,384		2,022	0.0	3,530		14,504	0.0	16,914		1.8	2.2	
Physical medicine	688	0.0	11,684		3,009	0.0	7		3,696	0.0	11,691		0.5	1.5	
Plastic & reconstructive surgeons	61,042	0.1	48,073		24,917	0.1	19,837		85,960	0.1	67,910		10.8	8.8	
Radiotherapists	427,279	0.9	381,640		177,496	0.6	156,241		604,775	0.8	537,881		76.1	69.8	
Surgeons	556,620	1.2	457,285		250,994	0.9	202,804		807,614	1.1	660,089		101.6	85.6	
Thoracic surgeons	140,830	0.	113,695		64,143	0.2	48,871		204,973	0.3	162,566		25.8	21.1	
Urologists	231,258	0.5	191,411		101,013	0.4	83,051		332,271	0.4	274,461		41.8	35.6	
<b>Clinical support specialists</b>													<b>0.0</b>		
Anaesthetists	1,009,809	2.1	829,486		443,494	1.6	372,311		1,453,303	1.9	1,201,796		182.9	155.9	
Radiologists	2,044,634	4.3	1,715,675		1,087,367	3.8	906,620		3,132,001	4.1	2,622,295		394.2	340.1	
Pathologists	2,041,072	4.3	1,737,716		1,396,232	4.9	1,033,650		3,437,304	4.5	2,771,367		432.6	359.5	
Other medical & clinical support specialists	173,707	0.4	9,368,054		5,561,006	19.5	4,584,431		5,734,713	7.5	13,952,485		721.7	1,809.7	

## Annexure H: Total benefits paid for the year ended 31 December 2009

	Open schemes				Restricted schemes				Consolidated				pabpa		
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
<b>Dentists</b>	<b>1,265,397</b>	<b>2.6</b>	<b>1,154,343</b>	<b>9.6</b>	<b>982,388</b>	<b>3.4</b>	<b>786,804</b>	<b>24.9</b>	<b>2,247,785</b>	<b>2.9</b>	<b>1,941,147</b>	<b>15.8</b>	<b>282.9</b>	<b>251.8</b>	<b>12.4</b>
<b>Dental specialists</b>	<b>319,077</b>	<b>0.7</b>	<b>285,093</b>	<b>11.9</b>	<b>220,208</b>	<b>0.8</b>	<b>206,674</b>	<b>6.5</b>	<b>539,285</b>	<b>0.7</b>	<b>491,766</b>	<b>9.7</b>	<b>67.9</b>	<b>63.8</b>	<b>6.4</b>
Dental therapists	30,396	0.1	30,329		68,146	0.2	44,035		98,541	0.1	74,364		12.4	9.6	
Dental technicians	NC	0.0	893		7,748	0.0	2,809		16,130	NC	3,702		2.0	0.5	
Maxilla, facial & oral surgeons	82,353	0.2	72,224		49,906	0.2	42,677		132,259	0.2	114,900		16.6	14.9	
Oral pathologists	78	0.0	52		105	0.0	47		183	0.0	99		0.0	0.0	
Orthodontists	159,771	0.3	147,990		80,185	0.3	103,996		239,955	0.3	251,986		30.2	32.7	
Periodontists	20,775	0.0	18,797		7,406	0.0	7,203		28,182	0.0	26,001		3.5	3.4	
Prosthodontists	17,322	0.0	14,808		6,713	0.0	5,906		24,035	0.0	20,714		3.0	2.7	
<b>Support &amp; allied health professionals</b>	<b>3,763,913</b>	<b>7.9</b>	<b>3,214,216</b>	<b>17.1</b>	<b>2,250,575</b>	<b>7.9</b>	<b>1,634,173</b>	<b>37.7</b>	<b>6,014,488</b>	<b>7.9</b>	<b>4,848,390</b>	<b>24.1</b>	<b>756.9</b>	<b>628.9</b>	<b>20.4</b>
Art therapy	260	0.0	130		651	0.0	17		911	0.0	146		0.1	0.0	
Audiologist	110,389	0.2	91,276		61,558	0.2	40,963		171,947	0.2	132,239		21.6	17.2	
Biokinetics	36,660	0.1	27,970		9,612	0.0	6,764		46,273	0.1	34,735		5.8	4.5	
Clinical technologists	516,063	1.1	423,495		280,293	1.0	203,275		796,357	1.0	626,771		100.2	81.3	
Dieticians	29,548	0.1	25,063		19,523	0.1	15,013		49,071	0.1	40,076		6.2	5.2	
Hearing aid acousticians	31,407	0.1	30,905		21,215	0.1	18,174		52,622	0.1	49,079		6.6	6.4	
Medical scientists	NC	0.0	49		NC	0.0	32		NC	NC	81		NC	0.0	
Occupational therapy	62,379	0.1	50,638		44,334	0.2	24,858		106,712	0.1	75,496		13.4	9.8	
Optometrists	1,034,785	2.2	1,012,775		844,742	3.0	698,708		1,879,527	2.5	1,711,483		236.5	222.0	
Orthoptists	NC	0.1	2,427		NC	0.1	1,018		NC	NC	3,446		NC	0.4	
Pharmacists	684,984	1.4	585,561		229,164	0.8	86,640		914,148	1.2	672,201		115.0	87.2	
Physiotherapists	600,556	1.3	484,351		352,790	1.2	280,717		953,346	1.2	765,068		120.0	99.2	
Podiatrists	24,420	0.1	20,653		11,980	0.0	8,589		36,401	0.0	29,243		4.6	3.8	
Psychologists	314,954	0.7	274,577		186,763	0.7	146,503		501,718	0.7	421,081		63.1	54.6	
Radiographer	35,216	0.1	26,885		19,768	0.1	14,385		54,984	0.1	41,270		6.9	5.4	
Privatenurse	41,102	0.1	32,013		34,799	0.1	27,730		75,901	0.1	59,743		9.6	7.7	
Social workers	13,126	0.0	12,227		6,390	0.0	4,979		19,516	0.0	17,206		2.5	2.2	
Speech therapists	20,860	0.0	16,723		6,552	0.0	15,674		27,411	0.0	32,397		3.4	4.2	
<b>Complementary medicines</b>															
Acupuncture & Chinese medicine	282	0.0	56		142	0.0	26		424	0.0	81		0.1	0.0	
Ayurvedic practitioners	6	0.0	8		4	0.0	7		10	0.0	15		0.0	0.0	
Chiropractors & osteopaths	55,993	0.1	46,467		15,448	0.1	13,589		71,441	0.1	60,056		9.0	7.8	
Homeopaths	27,385	0.1	20,755		6,910	0.0	6,475		34,295	0.0	27,230		4.3	3.5	



## Annexure H: Total benefits paid for the year ended 31 December 2009

	Open schemes				Restricted schemes				Consolidated				pabpa		
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
<b>Complementary medicines continued</b>															
Naturopaths & phytotherapists	83	0.0	116		98	0.0	103		180	0.0	219		0.0	0.0	
Theurapic massage, aromatherapy & reflexology	7	0.0	4		6	0.0	11		12	0.0	15		0.0	0.0	
Other supplementary & allied health professionals	83,479	0.2	29,091		79,821	0.3	19,922		163,300	0.2	49,013		20.6	6.4	
<b>Total hospitals</b>	<b>18,252,778</b>	<b>38.2</b>	<b>15,954,125</b>	<b>14.4</b>	<b>10,044,721</b>	<b>35.2</b>	<b>8,005,030</b>	<b>25.5</b>	<b>28,297,499</b>	<b>37.1</b>	<b>23,959,155</b>	<b>18.1</b>	<b>3,561.1</b>	<b>3,107.7</b>	<b>14.6</b>
<b>Private hospitals</b>	<b>18,169,716</b>	<b>38.0</b>	<b>15,871,867</b>	<b>14.5</b>	<b>9,838,796</b>	<b>34.5</b>	<b>7,861,697</b>	<b>25.1</b>	<b>28,008,512</b>	<b>36.7</b>	<b>23,733,565</b>	<b>18.0</b>	<b>3,524.8</b>	<b>3,078.4</b>	<b>14.5</b>
Ward fees	7,385,415	15.4	6,306,952		4,519,460	15.8	3,570,712		11,904,875	15.6	9,877,663		1,498.2	1,281.2	
Theatre fees	3,926,921	8.2	3,052,946		1,753,518	6.1	1,235,335		5,680,439	7.4	4,288,281		714.9	556.2	
Consumables	1,089,791	2.3	1,255,180		796,911	2.8	1,016,986		1,886,702	2.5	2,272,166		237.4	294.7	
Medicines	1,895,379	4.0	1,809,552		1,536,920	5.4	1,216,417		3,432,299	4.5	3,025,969		431.9	392.5	
Managed care arrangements (in-hospital benefits)	3,604,577	7.5	3,032,709		1,100,761	3.9	701,473		4,705,338	6.2	3,734,182		592.1	484.3	
Other	267,634	0.6	414,529		131,226	0.5	120,775		398,860	0.5	535,304		50.2	69.4	
<b>Provincial hospitals</b>	<b>83,062</b>	<b>0.2</b>	<b>82,258</b>	<b>1.0</b>	<b>205,925</b>	<b>0.7</b>	<b>143,333</b>	<b>43.7</b>	<b>288,987</b>	<b>0.4</b>	<b>225,591</b>	<b>28.1</b>	<b>36.4</b>	<b>29.3</b>	<b>24.3</b>
Ward fees	40,909	0.1	43,133		101,275	0.4	80,481		142,184	0.2	123,614		17.9	16.0	
Theatre fees	7,418	0.0	4,826		18,336	0.1	16,431		25,754	0.0	21,257		3.2	2.8	
Consumables	27,476	0.1	28,645		81,666	0.3	35,260		109,142	0.1	63,906		13.7	8.3	
Medicines	7,259	0.0	5,654		4,649	0.0	11,161		11,908	0.0	16,815		1.5	2.2	
<b>Total medicines</b>	<b>8,230,649</b>	<b>17.2</b>	<b>6,885,571</b>	<b>19.5</b>	<b>5,059,516</b>	<b>17.7</b>	<b>4,319,744</b>	<b>17.1</b>	<b>13,290,164</b>	<b>17.4</b>	<b>11,205,315</b>	<b>18.6</b>	<b>1,672.5</b>	<b>1,453.4</b>	<b>15.1</b>
Medicines dispensed by pharmacists	6,637,718	13.9	6,121,345		4,470,639	15.7	3,886,568		11,108,357	14.6	10,007,914		1397.9	1298.1	
Medicines dispensed by practitioners	420,845	0.9	439,479		440,214	1.5	349,333		861,059	1.1	788,812		108.4	102.3	
Medicines dispensed by medical specialists	375,304	0.8	266,929		119,704	0.4	58,139		495,008	0.6	325,068		62.3	42.2	
Medicines dispensed by support & allied health professionals	18,410	0.0	16,351		7,058	0.0	6,914		25,468	0.0	23,265		3.2	3.0	
Medicines dispensed by other health professionals	NC	1.6	41,467		21,900	0.1	18,788		NC	NC	60,256		100.7	7.8	
<b>Ex gratia payments</b>	<b>10,953</b>	<b>0.0</b>	<b>11,558</b>	<b>-5.2</b>	<b>78,331</b>	<b>0.3</b>	<b>16,941</b>	<b>362.4</b>	<b>89,284</b>	<b>0.1</b>	<b>28,499</b>	<b>213.3</b>	<b>11.2</b>	<b>3.7</b>	<b>204.0</b>
<b>Other benefits</b>	<b>1,137,108</b>	<b>2.4</b>	<b>906,795</b>	<b>25.4</b>	<b>1,095,572</b>	<b>3.8</b>	<b>707,916</b>	<b>54.8</b>	<b>2,232,679</b>	<b>2.9</b>	<b>1,614,711</b>	<b>38.3</b>	<b>281.0</b>	<b>209.4</b>	<b>34.2</b>
Basic life support	2,141	0.0	2,182		9,250	0.0	4,414		11,391	0.0	6,597		1.4	0.9	
Intermediate life support	4,174	0.0	4,588		413	0.0	6,267		4,587	0.0	10,855		0.6	1.4	
Advanced life support	131,028	0.3	114,647		24,811	0.1	12,914		155,838	0.2	127,561		19.6	16.5	
Blood courier services	3	0.0	11,504		3,050	0.0	2,675		3,053	0.0	14,180		0.4	1.8	
Blood transfusion services	353,591	0.7	266,017		189,915	0.7	134,411		543,506	0.7	400,429		68.4	51.9	
Home oxygen	25,037	0.1	25,459		12,525	0.0	11,828		37,562	0.0	37,287		4.7	4.8	
Appliances	39,121	0.1	47,530		78,643	0.3	53,704		117,764	0.2	101,234		14.8	13.1	
Prosthesis	115,579	0.2	99,769		352,569	1.2	208,889		468,148	0.6	308,658		58.9	40.0	

## Annexure H: Total benefits paid for the year ended 31 December 2009

	Open schemes				Restricted schemes				Consolidated				pabpa		
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
<b>Other benefits continued</b>															
Clinical services other	44,174	0.1	30,276		30,704	0.1	23,573		74,878	0.1	53,849		9.4	7.0	
Community health services	27	0.0	8		263	0.0	118		290	0.0	126		0.0	0.0	
Drug & alcohol rehabilitation	31,906	0.1	28,873		23,214	0.1	21,096		55,120	0.1	49,968		6.9	6.5	
Group practice	134,136	0.3	105,951		60,971	0.2	54,642		195,107	0.3	160,593		24.6	20.8	
Hospice	5,530	0.0	4,615		2,778	0.0	3,810		8,308	0.0	8,425		1.0	1.1	
Mental health institution	122,470	0.3	91,666		92,545	0.3	65,486		215,015	0.3	157,152		27.1	20.4	
Sub-acute / step-down facilities	66,644	0.1	50,701		57,947	0.2	34,328		124,591	0.2	85,029		15.7	11.0	
Other benefits	61,547	0.1	23,007		155,974	0.5	69,760		217,521	0.3	92,768		27.4	12.0	
<b>Managed care (out-of-hospital arrangements)</b>	<b>773,213</b>	<b>1.6</b>	<b>965,009</b>	<b>-19.9</b>	<b>442,636</b>	<b>1.6</b>	<b>365,162</b>	<b>21.2</b>	<b>1,215,849</b>	<b>1.6</b>	<b>1,330,171</b>	<b>-8.6</b>	<b>153.0</b>	<b>172.5</b>	<b>-11.3%</b>
<b>Total benefits</b>	<b>47,803,916</b>	<b>100.0</b>	<b>41,798,790</b>	<b>14.4</b>	<b>28,521,047</b>	<b>100.0</b>	<b>22,900,625</b>	<b>24.5</b>	<b>76,324,964</b>	<b>100.0</b>	<b>64,699,415</b>	<b>18.0</b>	<b>9,605.2</b>	<b>8,392.0</b>	<b>14.5%</b>

### Notes

2008 figures were sourced from the CMS Annual Statutory Report 2008-2009.

pabpa = per average beneficiary per annum

NC = Not Comparable

## Annexure I: Benefits paid from risk pool for the year ended 31 December 2009

Open schemes				Restricted schemes				Consolidated				pabpa			
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
General practitioners	2,250,984	5.4	2,351,345	-4.3	2,321,203	8.6	1,936,490	19.9	4,572,187	6.6	4,287,835	6.6	575.4	556.2	3.5
Medical specialists	9,735,936	23.3	8,272,510	17.7	5,520,720	20.4	4,475,902	23.3	15,256,656	22.1	12,748,412	19.7	1,920.0	1,653.6	16.1
Dermatologists	47,775	0.1	41,882		34,469	0.1	29,201		82,245	0.1	71,084		10.4	9.2	
Gynaecologists	569,317	1	513,372		385,492	1.4	316,737		954,810	1.4	830,108		120.2	107.7	
Pulmonologists	56,239	0	52,744		11,926	0.0	23,011		68,164	0.1	75,755		8.6	9.8	
Physicians	600,779	1.4	473,222		418,984	1.5	253,718		1,019,763	1.5	726,940		128.3	94.3	
Gastroenterologists	50,595	0.1	44,264		11,319	0.0	21,595		61,914	0.1	65,859		7.8	8.5	
Neurologists	77,651	0.2	68,210		41,093	0.2	35,954		118,744	0.2	104,163		14.9	13.5	
Cardiologists	257,378	0.6	215,476		68,777	0.3	102,881		326,155	0.5	318,357		41.0	41.3	
Psychiatrists	200,913	0.5	158,876		143,816	0.5	107,407		344,729	0.5	266,283		43.4	34.5	
Medical oncologists	63,192	0.2	59,684		13,065	0.0	16,820		76,257	0.1	76,504		9.6	9.9	
Neurosurgeons	203,140	0.5	170,425		93,926	0.3	76,764		297,066	0.4	247,189		37.4	32.1	
Nuclear medicine	52,390	0.1	42,536		25,052	0.1	20,778		77,443	0.1	63,314		9.7	8.2	
Ophthalmologists	439,367	1.1	358,483		222,038	0.8	186,349		661,405	1.0	544,832		83.2	70.7	
Clinical haematology	13,462	0.0	13,555		3,244	0.0	5,518		16,706	0.0	19,073		2.1	2.5	
Orthopaedic surgeons	619,375	1.5	505,572		268,060	1.0	218,142		887,434	1.3	723,715		111.7	93.9	
Otorhinolaryngologists	178,702	0.4	150,330		92,549	0.3	76,516		271,251	0.4	226,847		34.1	29.4	
Rheumatology	6,500	0.0	5,352		1,903	0.0	3,102		8,403	0.0	8,454		1.1	1.1	
Paediatricians	335,756	0.8	288,212		224,894	0.8	169,979		560,649	0.8	458,191		70.6	59.4	
Paediatric cardiologists	10,045	0.0	10,903		1,876	0.0	3,356		11,920	0.0	14,260		1.5	1.8	
Physical medicine	548	0.0	11,638		3,007	0.0	5		3,555	0.0	11,642		0.4	1.5	
Plastic & reconstructive surgeons	55,775	0.1	43,721		23,568	0.1	18,498		79,344	0.1	62,219		10.0	8.1	
Radiotherapists	424,242	1.0	379,115		177,044	0.7	155,822		601,286	0.9	534,938		75.7	69.4	
Surgeons	533,156	1.3	434,759		244,334	0.9	196,502		777,489	1.1	631,260		97.8	81.9	
Thoracic surgeons	139,794	0.3	112,731		63,780	0.2	48,369		203,574	0.3	161,100		25.6	20.9	
Urologists	208,271	0.5	172,196		96,262	0.4	78,585		304,533	0.4	250,780		38.3	32.5	
Clinical support specialists															
Anaesthetists	990,645	2.4	811,083		436,647	1.6	365,844		1,427,292	2.1	1,176,928		179.6	152.7	
Radiologists	1,799,994	4.3	1,499,316		1,062,657	3.9	883,889		2,862,651	4.2	2,383,206		360.3	309.1	
Pathologists	1,628,221	3.9	1,396,636		1,349,026	5.0	995,859		2,977,247	4.3	2,392,495		374.7	310.3	
Other medical & clinical support specialists	NC	NC	7,317		NC	NC	68,852		NC	NC	76,168		NC	9.9	

# Annexure I: Benefits paid from risk pool for the year ended 31 December 2009

Open schemes					Restricted schemes				Consolidated				pabpa		
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
Dentists	655,098	1.6	598,545	9.4	887,223	3.3	695,462	27.6	1,542,321	2.2	1,294,007	19.2	194.1	167.8	15.6
Dental specialists	191,197	0.5	169,522	12.8	199,780	0.7	188,407	6.0	390,977	0.6	357,929	9.2	49.2	46.4	6.0
Dental therapists	23,919	0.1	24,640		64,619	0.2	41,394		88,538	0.1	66,034		11.1	8.6	
Dental technicians	NC	0.0	734		7,413	0.0	2,750		NC	0.0	3,484		1.7	0.5	
Maxilla, facial & oral surgeons	52,925	0.1	46,537		46,114	0.2	39,469		99,039	0.1	86,006		12.3	11.2	
Oral pathologists	41	0.0	33		102	0.0	45		143	0.0	78		0.0	0.0	
Orthodontists	86,487	0.2	78,125		70,057	0.3	94,073		156,544	0.2	172,198		19.5	22.3	
Periodontists	11,268	0.0	10,191		5,881	0.0	5,747		17,150	0.0	15,938		2.1	2.1	
Prosthodontists	10,826	0.0	9,262		5,593	0.0	4,929		16,418	0.0	14,191		2.1	1.8	
Support & allied health professionals	2,755,639	6.6	2,283,017	20.7	2,004,500	7.4	1,416,270	41.5	4,760,138	6.9	3,699,286	28.7	599.0	479.8	24.8
Art therapy	158	0.0	86		597	0.0	12		756	0.0	98		0.1	0.0	
Audiologist	83,884	0.2	68,317		57,820	0.2	37,431		141,705	0.2	105,748		17.8	13.6	
Biokinetics	24,949	0.1	18,914		8,569	0.0	5,657		33,518	0.0	24,571		4.2	3.2	
Clinical technologists	510,637	1.2	418,140		279,073	1.0	202,429		789,710	1.1	620,569		99.4	79.6	
Dieticians	21,638	0.1	17,946		17,410	0.1	12,972		39,048	0.1	30,917		4.9	4.0	
Hearing aid acousticians	25,659	0.1	25,805		20,154	0.1	17,313		45,813	0.1	43,118		5.8	5.5	
Medical scientists	NC	0.0	30		NC	0.0	29		NC	0.0	59		0.1	0.0	
Occupational therapy	45,310	0.1	35,933		36,622	0.1	21,886		81,932	0.1	57,818		10.3	7.4	
Optometrists	397,340	0.9	401,134		674,819	2.5	538,773		1,072,160	1.6	939,907		134.9	119.5	
Orthoptists	NC	0.1	1,851		NC	0.1	953		NC	0.1	2,804		NC	0.4	
Pharmacists	660,420	1.6	562,766		219,407	0.8	84,809		879,827	1.3	647,575		110.7	84.0	
Physiotherapists	488,217	1.2	388,986		328,369	1.2	258,488		816,586	1.2	647,474		102.8	82.8	
Podiatrists	13,481	0.0	11,430		9,296	0.0	6,419		22,776	0.0	17,849		2.9	2.3	
Psychologists	230,647	0.6	198,896		175,351	0.6	135,643		405,999	0.6	334,539		51.1	43.0	
Radiographers	34,054	0.1	26,108		19,384	0.1	14,188		53,438	0.1	40,296		6.7	5.2	
Private nurses	27,683	0.1	20,989		32,542	0.1	25,710		60,226	0.1	46,699		7.6	6.0	
Social workers	9,205	0.0	8,263		5,901	0.0	4,535		15,106	0.0	12,799		1.9	1.7	
Speech therapists	18,477	0.0	15,066		5,912	0.0	15,276		24,389	0.0	30,342		3.1	3.9	
Complementary medicines															
Acupuncture & Chinese medicines	48	0.0	17		111	0.0	22		159	0.0	39		0.0	0.0	



## Annexure I: Benefits paid from risk pool for the year ended 31 December 2009

Open schemes				Restricted schemes				Consolidated				pabpa			
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
Complementary medicines continued															
Ayurvedic practitioners	3	0.0	4		2	0.0	4		5	0.0	8		0.0	0.0	
Chiropractors & osteopaths	28,222	0.1	23,563		11,149	0.0	9,866		39,371	0.1	33,428		5.0	4.2	
Homeopaths	15,865	0.0	10,819		4,827	0.0	4,434		20,691	0.0	15,253		2.6	1.9	
Naturopaths & phytotherapists	29	0.0	53		81	0.0	87		110	0.0	141		0.0	0.0	
Theurapic massage, aromatherapy & reflexology	2	0.0	1		4	0.0	8		5	0.0	9		0.0	0.0	
Other support & allied health professionals	81,994	0.2	27,898		79,343	0.3	19,328		161,337	0.2	47,226		20.3	6.1	
Total hospitals	18,127,822	43.3	15,823,875	14.6	10,031,763	37.0	7,995,252	25.5	28,159,585	40.9	23,819,127	18.2	3,543.8	3,089.5	14.7
Private hospitals	18,047,156	43.1	15,744,117	14.6	9,826,323	36.3	7,852,336	25.1	27,873,479	40.4	23,596,453	18.1	3,507.8	3,060.6	14.6
Ward fees	7,337,161	17.5	6,239,547		4,514,137	16.7	3,566,496		11,851,298	17.2	9,806,042		1,491.4	1,271.9	
Theatre fees	3,914,365	9.4	3,043,144		1,752,832	6.5	1,234,818		5,667,197	8.2	4,277,962		713.2	554.9	
Consumables	1,068,445	2.6	1,237,459		794,325	2.9	1,015,387		1,862,770	2.7	2,252,846		234.4	292.2	
Medicines	1,891,367	4.5	1,805,841		1,534,932	5.7	1,214,656		3,426,298	5.0	3,020,497		431.2	391.8	
Managed care arrangements (in-hospital benefits)	3,576,485	8.5	3,011,559		1,099,253	4.1	700,569		4,675,738	6.8	3,712,128		588.4	481.5	
Other	259,333	0.6	406,567		130,844	0.5	120,411		390,176	0.6	526,978		49.1	68.4	
Provincial hospitals	80,666	0.2	79,758	1.1	205,440	0.8	142,916	43.7	286,106	0.4	222,674	28.5	36.0	28.9	24.7
Ward fees	40,607	0.1	42,625		101,156	0.4	80,338		141,763	0.2	122,963		17.8	15.9	
Theatre fees	7,343	0.0	4,755		18,334	0.1	16,427		25,677	0.0	21,182		3.2	2.7	
Consumables	25,543	0.1	26,836		81,353	0.3	35,007		106,895	0.2	61,843		13.5	8.0	
Medicines	7,173	0.0	5,542		4,598	0.0	11,143		11,770	0.0	16,686		1.5	2.2	
Total medicines	6,241,427	14.9	5,187,287	20.3	4,515,742	16.7	3,861,017	17.0	10,757,169	15.6	9,048,304	18.9	1,353.7	1,173.6	15.3
Medicines dispensed by pharmacists	4,766,597	11.4	4,544,589		3,972,856	14.7	3,467,974		8,739,453	12.7	8,012,563		1,099.8	1,039.3	
Medicines dispensed by practitioners	309,759	0.7	325,148		397,235	1.5	311,831		706,994	1.0	636,979		89.0	82.6	
Medicines dispensed by medical specialists	370,861	0.9	263,288		118,020	0.4	56,901		488,881	0.7	320,189		61.5	41.5	
Medicines dispensed by support & allied health professionals	16,460	0.0	13,547		5,857	0.0	5,686		22,317	0.0	19,234		2.8	2.5	
Medicines dispensed by other health professionals	NC	1.9	40,714		21,774	0.1	18,625		NC	1.2	59,339		NC	7.7	

## Annexure I: Benefits paid from risk pool for the year ended 31 December 2009

Open schemes				Restricted schemes				Consolidated				pabpa			
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
Ex gratia payments	10,953	0.0	11,558	-5.2	78,197	0.3	16,897	362.8	89,151	0.1	28,454	213.3	11.2	3.7	204.0
Other benefits total	1,091,418	2.6	868,917	25.6	1,084,358	4.0	698,869	55.2	2,175,777	3.2	1,567,786	38.8	273.8	203.4	34.6
Basic life support	2,139	0.0	2,182		9,167	0.0	4,299		11,307	0.0	6,481		1.4	0.8	
Intermediate life support	4,174	0.0	4,576		413	0.0	6,194		4,587	0.0	10,770		0.6	1.4	
Advanced life support	130,770	0.3	114,386		24,702	0.1	12,866		155,472	0.2	127,252		19.6	16.5	
Blood courier services	3	0.0	11,504		3,050	0.0	2,672		3,052	0.0	14,177		0.4	1.8	
Blood transfusion services	353,239	0.8	265,686		189,777	0.7	134,335		543,017	0.8	400,021		68.3	51.9	
Home oxygen	22,148	0.1	23,339		12,221	0.0	11,510		34,369	0.0	34,848		4.3	4.5	
Appliances	37,047	0.1	45,151		75,823	0.3	50,974		112,870	0.2	96,125		14.2	12.5	
Prosthesis	114,495	0.3	98,226		350,498	1.3	207,274		464,993	0.7	305,499		58.5	39.6	
Clinical services other	41,032	0.1	27,958		30,378	0.1	22,866		71,411	0.1	50,824		9.0	6.6	
Community health services	16	0.0	4		263	0.0	118		279	0.0	122		0.0	0.0	
Drug & alcohol rehabilitation	31,866	0.1	28,857		23,210	0.1	21,079		55,076	0.1	49,936		6.9	6.5	
Group practice	116,560	0.3	93,108		58,158	0.2	52,317		174,718	0.3	145,425		22.0	18.9	
Hospice	5,318	0.0	4,357		2,730	0.0	3,770		8,048	0.0	8,126		1.0	1.1	
Mental health institution	122,411	0.3	91,581		92,456	0.3	65,484		214,868	0.3	157,065		27.0	20.4	
Sub-acute / step-down facilities	66,590	0.2	50,686		57,821	0.2	34,259		124,411	0.2	84,945		15.7	11.0	
Other	NC	0.1	861,600		930,667	3.4	630,017		1,978,478	2.9	1,491,617		249.0	193.5	
Managed care (out-of-hospital arrangements)	773,213	1.8	965,009	-19.9	442,636	1.6	365,294	21.2	1,215,849	1.8	1,330,303	-8.6	153.0	172.5	-11.3
Total benefits	41,833,687	100.0	36,531,585	14.5	27,086,123	100.0	21,649,859	25.1	68,919,810	100.0	58,181,444	18.5	8,673.3	7,546.5	14.9

### Notes

2008 figures were sourced from the CMS Annual Statutory Report 2008-2009.

pabpa = per average beneficiary per annum

NC = Not Comparable



## Annexure J: Benefits paid from savings accounts for the year ended 31 December 2009

Open schemes				Restricted schemes				Consolidated				pabpa			
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
General practitioners	793,253	13.3	679,673	16.7	308,918	21.5	267,500	15.5	1,102,170	14.9	947,174	16.4	138.7	122.9	12.9
Medical specialists	1,270,656	21.3	1,118,551	13.6	196,260	13.7	178,289	10.1	1,466,916	19.8	1,296,841	13.1	184.6	168.2	9.7
Dermatologists	42,541	0.7	35,648		7,741	0.5	7,021		50,282	0.7	42,669		6.3	5.5	
Gynaecologists	149,964	2.5	135,283		28,193	2.0	26,830		178,157	2.4	162,112		22.4	21.0	
Pulmonologists	7,500	0.1	7,242		533	0.0	1,053		8,032	0.1	8,295		1.0	1.1	
Physicians	51,774	0.9	42,919		13,921	1.0	10,273		65,694	0.9	53,192		8.3	6.9	
Gastroenterologists	4,648	0.1	5,047		576	0.0	1,073		5,224	0.1	6,120		0.7	0.8	
Neurologists	12,680	0.2	11,582		2,452	0.2	2,467		15,133	0.2	14,049		1.9	1.8	
Cardiologists	37,278	0.6	33,488		3,336	0.2	5,221		40,614	0.5	38,709		5.1	5.0	
Psychiatrists	29,727	0.5	25,144		4,130	0.3	3,567		33,857	0.5	28,711		4.3	3.7	
Medical oncologists	1,703	0.0	1,229		155	0.0	187		1,858	0.0	1,416		0.2	0.2	
Neurosurgeons	6,109	0.1	5,570		1,960	0.1	1,969		8,069	0.1	7,538		1.0	1.0	
Nuclear medicine	5,739	0.1	5,426		300	0.0	500		6,039	0.1	5,926		0.8	0.8	
Ophthalmologists	55,646	0.9	48,753		10,885	0.8	10,026		66,531	0.9	58,780		8.4	7.6	
Clinical haematology	720	0.0	688		102	0.0	125		822	0.0	814		0.1	0.1	
Orthopaedic surgeons	31,757	0.5	28,140		8,623	0.6	8,152		40,381	0.5	36,293		5.1	4.7	
Otorhinolaryngologists	27,256	0.5	23,642		5,753	0.4	5,159		33,008	0.4	28,802		4.2	3.7	
Rheumatology	1,824	0.0	1,699		178	0.0	459		2,002	0.0	2,158		0.3	0.3	
Paediatricians	67,775	1.1	60,094		14,911	1.0	13,207		82,686	1.1	73,301		10.4	9.5	
Paediatric cardiologists	2,437	0.0	2,481		147	0.0	173		2,584	0.0	2,654		0.3	0.3	
Physical medicine	140	0.0	46		1	0.0	2		141	0.0	49		0.0	0.0	
Plastic & reconstructive surgeons	5,267	0.1	4,352		1,349	0.1	1,339		6,616	0.1	5,691		0.8	0.7	
Radiotherapists	3,036	0.1	2,524		452	0.0	419		3,489	0.0	2,943		0.4	0.4	
Surgeons	23,465	0.4	22,526		6,660	0.5	6,303		30,125	0.4	28,828		3.8	3.7	
Thoracic surgeons	1,036	0.0	965		363	0.0	502		1,399	0.0	1,467		0.2	0.2	
Urologists	22,988	0.4	19,215		4,751	0.3	4,466		27,739	0.4	23,681		3.5	3.1	
Clinical support specialists															
Anaesthetists	19,164	0.3	18,402		6,846	0.5	6,466		26,010	0.4	24,869		3.3	3.2	
Radiologists	244,640	4.1	216,358		24,710	1.7	22,731		269,350	3.6	239,089		33.9	31.0	
Pathologists	412,852	6.9	341,080		47,206	3.3	37,791		460,057	6.2	378,871		57.9	49.1	
Other medical & clinical support specialists	992	0.0	1,118,551		196,260	13.7	178,289		1,466,916	19.8	1,296,841		184.6	168.2	

## Annexure J: Benefits paid from savings accounts for the year ended 31 December 2009

Open schemes				Restricted schemes				Consolidated				pabpa			
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
Dentists	610,299	10.2	555,798	9.8	95,165	6.6	91,342	4.2	705,464	9.5	647,140	9.0	88.8	83.9	5.8
Dental specialists	127,880	2.1	115,570	10.7	20,428	1.4	18,267	11.8	148,308	2.0	133,837	10.8	18.7	17.4	7.5
Dental therapists	6,477	0.1	5,689		3,526	0.2	2,641		10,003	0.1	8,330		1.3	1.1	
Dental technicians	NC	0.0	158		NC	0.0	59		NC	0.0	218		NC	0.0	
Maxilla, facial & oral surgeons	29,428	0.5	25,686		3,792	0.3	3,208		33,220	0.4	28,894		4.2	3.7	
Oral pathologists	37	0.0	19		3	0.0	2		40	0.0	21		0.0	0.0	
Orthodontists	73,283	1.2	69,865		10,128	0.7	9,923		83,411	1.1	79,789		10.5	10.3	
Periodontists	9,507	0.2	8,606		1,525	0.1	1,456		11,032	0.1	10,063		1.4	1.3	
Prosthodontists	6,496	0.1	5,546		1,121	0.1	977		7,617	0.1	6,523		1.0	0.8	
Support & allied health professionals	1,008,275	16.9	931,200	8.3	246,075	17.1	217,904	12.9	1,254,350	16.9	1,149,103	9.2	157.9	149.0	5.9
Art therapy	101	0.0	43		54	0.0	5		155	0.0	48		0.0	0.0	
Audiologist	26,505	0.4	22,959		3,738	0.3	3,532		30,243	0.4	26,491		3.8	3.4	
Biokinetics	11,711	0.2	9,056		1,044	0.1	1,107		12,755	0.2	10,163		1.6	1.3	
Clinical technologists	5,427	0.1	5,356		1,220	0.1	846		6,647	0.1	6,202		0.8	0.8	
Dieticians	7,910	0.1	7,117		2,113	0.1	2,042		10,022	0.1	9,158		1.3	1.2	
Hearing aid acousticians	5,747	0.1	5,100		1,061	0.1	861		6,809	0.1	5,961		0.9	0.8	
Medical scientists	NC	0.0	19		NC	0.0	3		NC	0.0	21		0.0	0.0	
Occupational therapy	17,069	0.3	14,706		7,711	0.5	2,972		24,781	0.3	17,678		3.1	2.3	
Optometrists	637,444	10.7	611,641		169,923	11.8	159,935		807,367	10.9	771,576		101.6	100.1	
Orthoptists	NC	0.0	576		182	0.0	66		NC	0.0	641		0.3	0.1	
Pharmacists	24,564	0.4	22,795		9,757	0.7	1,831		34,321	0.5	24,626		4.3	3.2	
Physiotherapists	112,339	1.9	95,365		24,421	1.7	22,229		136,760	1.8	117,594		17.2	15.3	
Podiatrists	10,940	0.2	9,223		2,685	0.2	2,171		13,625	0.2	11,394		1.7	1.5	
Psychologists	84,307	1.4	75,681		11,412	0.8	10,860		95,719	1.3	86,541		12.0	11.2	
Radiographers	1,163	0.0	777		383	0.0	197		1,546	0.0	974		0.2	0.1	
Private nurses	13,419	0.2	11,024		2,257	0.2	2,020		15,675	0.2	13,044		0.0	1.7	
Social workers	3,921	0.1	3,963		489	0.0	444		4,410	0.1	4,407		0.6	0.6	
Speech therapists	2,382	0.0	1,657		640	0.0	398		3,022	0.0	2,055		0.4	0.3	



## Annexure J: Benefits paid from savings accounts for the year ended 31 December 2009

	Open schemes				Restricted schemes				Consolidated				pabpa		
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
<b>Complementary medicines</b>															
Acupuncture & Chinese medicine	234	0.0	39		31	0.0	4		265	0.0	43		0.0	0.0	
Ayurvedic practitioners	3	0.0	4		2	0.0	3		5	0.0	8		0.0	0.0	
Chiropractors & osteopaths	27,771	0.5	22,904		4,299	0.3	3,723		32,070	0.4	26,628		4.0	3.5	
Homeopaths	11,520	0.2	9,936		2,083	0.1	2,041		13,603	0.2	11,977		1.7	1.6	
Naturopaths & phytotherapists	54	0.0	63		16	0.0	16		70	0.0	79		0.0	0.0	
Theurapic massage, aromatherapy & reflexology	5	0.0	3		2	0.0	3		7	0.0	6		0.0	0.0	
Other support & allied health professionals	1,485	0.0	1,193		478	0.0	594		1,963	0.0	1,787		0.2	0.2	
<b>Total hospitals</b>	<b>124,956</b>	<b>2.1</b>	<b>130,250</b>	<b>-4.1</b>	<b>12,958</b>	<b>0.9</b>	<b>9,779</b>	<b>32.5</b>	<b>137,914</b>	<b>1.9</b>	<b>140,029</b>	<b>-1.5</b>	<b>17.4</b>	<b>18.2</b>	<b>-4.4</b>
<b>Private hospitals</b>	<b>122,560</b>	<b>2.1</b>	<b>127,750</b>	<b>-4.1</b>	<b>12,473</b>	<b>0.9</b>	<b>9,361</b>	<b>33.2</b>	<b>135,033</b>	<b>1.8</b>	<b>137,111</b>	<b>-1.5</b>	<b>17.0</b>	<b>17.8</b>	<b>-4.4</b>
Ward fees	48,254	0.8	67,405		5,323	0.4	4,216		53,577	0.7	71,621		6.7	9.3	
Theatre fees	12,556	0.2	9,801		686	0.0	517		13,241	0.2	10,318		1.7	1.3	
Consumables	21,346	0.4	17,721		2,585	0.2	1,599		23,931	0.3	19,320		3.0	2.5	
Medicines	4,012	0.1	3,710		1,988	0.1	1,762		6,000	0.1	5,472		0.8	0.7	
Managed care arrangements (in-hospital benefits)	28,091	0.5	21,150		1,508	0.1	904		29,599	0.4	22,054		3.7	2.9	
Other	8,301	0.1	7,963		383	0.0	364		8,684	0.1	8,326		1.1	1.1	
<b>Provincial hospitals</b>	<b>2,396</b>	<b>0.0</b>	<b>2,500</b>	<b>-4.2</b>	<b>485</b>	<b>0.0</b>	<b>417</b>	<b>16.2</b>	<b>2,881</b>	<b>0.0</b>	<b>2,917</b>	<b>-1.2</b>	<b>0.4</b>	<b>0.4</b>	<b>-4.2</b>
Ward fees	302	0.0	508		119	0.0	143		420	0.0	651		0.1	0.1	
Theatre fees	75	0.0	71		1	0.0	4		76	0.0	75		0.0	0.0	
Consumables	1,934	0.0	1,809		313	0.0	253		2,247	0.0	2,062		0.3	0.3	
Medicines	86	0.0	112		52	0.0	18		138	0.0	129		0.0	0.0	
<b>Total medicines</b>	<b>1,989,222</b>	<b>33.3</b>	<b>1,698,284</b>	<b>17.1</b>	<b>543,774</b>	<b>37.9</b>	<b>458,726</b>	<b>18.5</b>	<b>2,532,996</b>	<b>34.2</b>	<b>2,157,011</b>	<b>17.4</b>	<b>318.8</b>	<b>279.8</b>	<b>13.9</b>
Medicines dispensed by pharmacists	1,871,120	31.3	1,576,756		497,784	34.7	418,594		2,368,904	32.0	1,995,350		298.1	258.8	
Medicines dispensed by practitioners	111,086	1.9	114,331		42,979	3.0	37,502		154,065	2.1	151,833		19.4	19.7	
Medicines dispensed by medical specialists	4,443	0.1	3,640		1,684	0.1	1,239		6,127	0.1	4,879		0.8	0.6	
Medicines dispensed by support & allied health professionals	1,950	0.0	2,804		1,201	0.1	1,228		3,151	0.0	4,031		0.4	0.5	
Medicines dispensed by other health professionals	623	0.0	753		126	0.0	164		749	0.0	917		0.1	0.1	

## Annexure J: Benefits paid from savings accounts for the year ended 31 December 2009

Open schemes				Restricted schemes				Consolidated				pabpa			
	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R'000	2009 % of total	2008 R'000	% change	2009 R	2008 R	% change
Ex gratia payments	-	0.0	0	-100.0	134	0.0	44	201.7	134	0.0	44	201.2	0.0	0.0	192.2
Other benefits total	45,689	0.8	37,878	20.6	11,214	0.8	9,047	23.9	56,903	0.8	46,925	21.3	7.2	6.1	17.7
Basic life support	2	0.0	0		83	0.0	115		85	0.0	115		0.0	0.0	
Intermediate life support	-	0.0	13		-	0.0	72		-	0.0	85		0.0	0.0	
Advanced life support	258	0.0	261		108	0.0	48		366	0.0	309		0.0	0.0	
Blood courier services	0	0.0	-		1	0.0	3		1	0.0	3		0.0	0.0	
Blood transfusion services	351	0.0	332		137	0.0	76		489	0.0	408		0.1	0.1	
Home oxygen	2,888	0.0	2,121		304	0.0	318		3,192	0.0	2,439		0.4	0.3	
Appliances	2,074	0.0	2,379		2,820	0.2	2,730		4,894	0.1	5,109		0.6	0.7	
Prosthesis	1,084	0.0	1,543		2,072	0.1	1,615		3,155	0.0	3,159		0.4	0.4	
Clinical services other	3,142	0.1	2,319		326	0.0	706		3,467	0.0	3,025		0.4	0.4	
Community health services	11	0.0	4		-	0.0	0		11	0.0	4		0.0	0.0	
Drug & alcohol rehabilitation	40	0.0	16		4	0.0	17		44	0.0	33		0.0	0.0	
Group practice	17,576	0.3	12,843		2,813	0.2	2,325		20,389	0.3	15,168		2.6	2.0	
Hospice	212	0.0	258		48	0.0	41		260	0.0	299		0.0	0.0	
Mental health institution	58	0.0	85		89	0.0	2		147	0.0	87		0.0	0.0	
Sub-acute / step-down facilities	54	0.0	15		126	0.0	69		180	0.0	84		0.0	0.0	
Other benefits	17,939	0.3	37,878		11,214	0.8	9,047		56,903	0.8	46,925		7.2	6.1	
Managed care (out-of-hospital arrangements)	NC	0.0	NC	NC	NC	0.0	NC	NC	NC	0.0	NC	NC	NC	NC	NC
Total benefits	5,970,229	100.0	5,267,205	13.3	1,434,925	100.0	1,250,766	14.7	7,405,154	100.0	6,517,972	13.6	931.9	845.4	10.2

### Notes

2008 figures were sourced from the CMS Annual Statutory Report 2008-2009.

pabpa = per average beneficiary per annum

NC = Not Comparable



## Annexure K: Income statement details: registered schemes for the year ended 31 December 2009

Ref. no.	Average members	Average beneficiaries	Average age pb	Pensioner ratio (65+ years)	No. of dependants per member	Gross contribution (risk + PMSA)	Gross relevant healthcare expenditure (gross + PMSA) (Note k)	Gross administration expenses (risk + PMSA)	Managed healthcare: management services	Broker fees (Note l)	Net impairment losses: trade and other receivables	Net reinsurance results	Net healthcare results	Net surplus/ (deficit) after consolidation results
Name of medical scheme	Years		%			R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
<b>Registered schemes: open</b>														
1252 Bestmed Medical Scheme	39,320	88,758	33.7	7.9	1.2	1,038,682	(885,295)	(124,189)	(24,800)	(19,647)	(1,405)	-	(34,148)	17,742
1512 Bonitas Medical Fund	274,327	641,674	30.6	4.2	1.3	6,193,402	(5,742,578)	(570,286)	(183,990)	(133,723)	(1,001)	-	(451,435)	(242,276)
1034 Cape Medical Plan	6,903	15,378	34.1	9.7	1.2	121,796	(119,839)	(16,428)	-	-	(204)	-	(14,852)	666
1552 Community Medical Aid Scheme (COMMED)	14,075	34,235	35.5	9.4	1.4	376,585	(346,150)	(53,902)	(9,594)	(5,847)	(658)	-	(39,566)	(22,108)
1491 Compcare Wellness Medical Scheme	13,835	31,844	37.3	11.5	1.3	437,415	(449,641)	(45,637)	(14,072)	(8,259)	(938)	-	(86,751)	(38,570)
1125 Discovery Health Medical Scheme	893,411	1,996,866	31.6	5.9	1.2	23,840,326	(19,847,609)	(2,552,566)	(565,273)	(538,275)	(42,613)	-	94,849	790,832
1202 Fedhealth Medical Scheme	86,797	189,259	35.5	8.1	1.2	2,257,014	(2,065,977)	(225,608)	(46,813)	(50,074)	(2,047)	-	(119,631)	37,464
1554 Genesis Medical Scheme	7,305	21,263	30.5	4.8	1.9	163,014	(128,643)	(19,272)	-	(2,605)	10	-	11,765	27,500
1561 Gen-Health Medical Scheme	11,692	28,345	36.1	7.5	1.4	244,634	(257,864)	(31,113)	(7,127)	(4,323)	2,246	-	(55,609)	(42,274)
1466 Good Hope Medical Aid Society	3,395	8,769	30.0	1.2	1.5	39,962	(36,964)	(3,825)	(327)	(1,111)	(87)	-	(2,351)	1,141
1537 Hosmed Medical Aid Scheme	30,633	91,854	29.2	2.0	1.8	836,451	(679,031)	(114,001)	(18,156)	(21,034)	123	-	4,351	15,835
1577 Ingwe Health Plan	17,217	24,841	28.5	2.1	0.4	154,780	(122,568)	(19,186)	(5,998)	(4,327)	(4,601)	-	(1,900)	2,125
1087 Keyhealth	45,718	105,817	40.1	15.0	1.3	1,516,489	(1,416,933)	(122,047)	(27,803)	(32,053)	(17,423)	-	(104,707)	(51,835)
1576 Liberty Health Medical Scheme	44,531	94,969	36.8	10.8	1.1	1,073,064	(972,720)	(109,973)	(25,807)	(23,111)	(1,910)	-	(66,229)	(29,793)
1549 Medicoover	44,025	109,630	30.1	4.6	1.4	995,419	(925,408)	(78,606)	(29,515)	(21,543)	(12,845)	-	(55,113)	2,858
1149 Medihelp	109,657	213,386	42.7	22.5	1.0	3,221,220	(3,044,901)	(267,975)	(52,633)	(29,592)	(7,136)	-	(186,201)	(75,749)
1506 Medimed Medical Scheme	4,396	11,544	28.7	3.4	1.6	91,593	(79,312)	(6,768)	(1,286)	-	1,227	-	4,040	12,056
1140 Medshield Medical Scheme	73,529	175,578	30.9	3.4	1.4	1,493,498	(1,375,418)	(142,679)	(40,665)	(71,541)	(815)	-	(137,619)	(22,419)
1167 Momentum Health	80,303	177,765	33.2	7.6	1.2	1,895,927	(1,682,175)	(180,039)	(48,659)	(62,669)	(3,931)	-	(71,288)	(8,708)
1166 National Independent Medical Aid Society (NIMAS)	14,534	31,547	38.0	12.9	1.2	343,395	(316,180)	(26,192)	(5,934)	(5,757)	(1,152)	-	(10,692)	(1,522)
1215 Oxygen Medical Scheme	63,518	146,026	37.2	14.4	1.3	1,525,723	(1,399,900)	(148,061)	(31,589)	(41,505)	(25,871)	-	(117,316)	(88,400)
1546 Pharos Medical Plan	7,381	17,192	34.5	9.2	1.3	209,181	(165,807)	(28,420)	(4,331)	(4,512)	5	-	6,267	10,896
1454 Pro Sano Medical Scheme	31,237	70,842	37.8	11.9	1.2	783,496	(792,085)	(74,293)	(18,713)	(5,617)	174	-	(108,365)	(48,789)
1196 Protea Medical Aid Society	5,749	6,771	32.1	11.2	0.2	48,261	(49,906)	(7,437)	(1,470)	(186)	(638)	-	(11,376)	(8,905)
1170 Purehealth Medical Scheme	3,305	6,844	44.0	22.6	1.1	134,685	(122,525)	(11,531)	(2,545)	(510)	(350)	472	(3,051)	(688)
1575 Resolution Health Medical Scheme	36,152	80,397	30.0	2.3	1.2	617,459	(478,055)	(110,183)	(32,533)	(15,314)	369	-	(19,753)	(4,165)
1446 Selfmed Medical Scheme	11,698	24,892	41.5	18.7	1.1	291,256	(262,361)	(36,447)	(5,185)	(1,823)	112	-	(14,448)	3,783
1486 Sizwe Medical Fund	63,107	160,316	31.1	5.5	1.5	1,574,519	(1,417,186)	(161,813)	(34,207)	(26,318)	(187)	-	(65,191)	(4,418)
1141 Spectramed	55,527	124,535	33.1	6.1	1.2	1,454,014	(1,282,233)	(141,653)	(18,294)	(24,422)	(5,311)	-	(17,898)	4,225
1464 Suremed Health	1,571	3,743	32.8	5.6	1.4	40,693	(34,290)	(4,810)	(792)	(1,200)	(71)	-	(1,998)	3,182

## Annexure K: Income statement details: registered schemes for the year ended 31 December 2009

Ref. no.	Name of medical scheme	Average members	Average beneficiaries	Average age pb	Pensioner ratio (65+ years)	No. of dependants per member	Gross contribution (risk + PMSA)	Gross relevant healthcare expenditure (gross + PMSA) (Note k)	Gross administration expenses (risk + PMSA)	Managed healthcare: management services	Broker fees (Note l)	Net impairment losses: trade and other receivables	Net reinsurance results	Net healthcare results	Net surplus/ (deficit) after consolidation results
				Years	%		R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
<b>Registered schemes: open continued</b>															
1147	Telemed	25,496	54,198	39.4	15.4	1.1	959,102	(838,519)	(74,201)	(18,590)	(4,130)	(1,819)	-	25,718	46,245
1592	Thebemed	4,453	14,845	25.2	0.2	2.4	84,487	(68,788)	(9,138)	(3,854)	(2,363)	(112)	-	231	1,426
1422	Topmed Medical Scheme	12,504	26,717	36.6	12.1	1.1	296,631	(267,908)	(32,968)	(7,891)	(6,629)	(66)	-	(17,245)	(4,994)
<b>Sub-total: registered open schemes</b>		<b>2,137,300</b>	<b>4,830,636</b>	<b>32.9</b>	<b>7.3</b>	<b>1.2</b>	<b>54,354,174</b>	<b>(47,674,769)</b>	<b>(5,551,246)</b>	<b>(1,288,447)</b>	<b>(1,170,021)</b>	<b>(128,924)</b>	<b>472</b>	<b>(1,667,515)</b>	<b>282,363</b>
<b>Registered schemes: restricted</b>															
1005	AECI Medical Aid Society	7,383	15,661	41.6	22.7	1.1	233,200	(225,602)	(15,150)	(6,319)	-	309	-	(13,560)	632
1487	Afrisam SA Medical Scheme	1,209	2,612	42.7	21.9	1.1	38,905	(39,353)	(3,804)	(897)	-	(57)	-	(5,015)	(2,678)
1567	Afrox Medical Aid Society	3,436	7,938	31.4	7.3	1.3	81,410	(78,618)	(7,147)	(1,202)	-	0	-	(5,557)	24,498
1456	Alliance Midmed Medical Scheme	1,892	4,883	27.4	3.0	1.6	54,818	(51,385)	(4,425)	(1,410)	-	18	-	(3,265)	2,060
1534	Altron Medical Aid Scheme	4,487	10,039	36.5	12.5	1.2	132,016	(135,194)	(12,747)	(1,478)	-	(62)	-	(18,544)	(12,185)
1012	Anglo Medical Scheme	11,837	27,242	38.3	17.7	1.3	396,055	(399,139)	(24,118)	(6,161)	-	(50)	-	(35,701)	256,296
1571	Anglovaal Group Medical Scheme	4,280	8,804	39.2	18.9	1.1	124,106	(115,632)	(10,892)	(2,780)	-	(50)	-	(7,043)	701
1279	Bankmed	101,113	200,012	30.0	6.2	1.0	2,446,403	(2,242,752)	(189,806)	(62,636)	-	(254)	-	(56,068)	56,116
1507	Barloworld Medical Scheme	5,969	12,696	38.5	18.6	1.1	210,280	(202,165)	(11,016)	(5,186)	-	26	-	(8,061)	6,642
1526	BMW Employees Medical Aid Society	2,247	6,211	29.7	1.7	1.8	66,666	(76,976)	(3,682)	(1,678)	-	75	-	(8,620)	5,963
1237	BP Medical Aid Society	2,409	5,482	39.9	20.2	1.3	61,496	(73,268)	(3,821)	(1,468)	-	(14)	-	(17,075)	(45)
1590	Building & Construction Industry Medical Aid Fund	5,049	12,423	30.6	3.3	1.5	56,452	(47,738)	(7,532)	(694)	-	-	-	488	4,415
1593	Built Environment Professional Associations Medical Scheme (BEPMED)	2,089	4,785	33.0	5.7	1.3	54,918	(47,101)	(2,868)	(1,027)	(1,244)	5	380	3,396	3,881
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAFA)	23,886	40,913	28.8	4.8	0.7	568,530	(492,799)	(62,700)	(13,680)	-	156	-	(7,716)	12,790
1521	Clicks Group Medical Scheme	835	1,706	32.0	3.7	1.0	12,705	(10,995)	(1,829)	(350)	-	180	-	(284)	442
1068	De Beers Benefit Society	7,391	16,901	38.4	13.0	1.3	223,640	(225,984)	(16,298)	(944)	-	(627)	-	(20,212)	17,559
1484	Edcon Medical Aid Scheme	3,698	7,391	31.3	8.2	1.0	78,707	(71,751)	(8,556)	(2,078)	-	(243)	-	(4,332)	(2,090)
1572	Engen Medical Benefit Fund	3,495	8,169	35.8	12.8	1.3	115,706	(107,442)	(5,556)	(2,671)	-	(37)	-	(1,870)	4,045
1585	Eyethumed Medical Scheme	3,449	7,008	32.9	0.6	1.0	33,755	(33,968)	(5,654)	(655)	(612)	(270)	-	(7,404)	(3,867)
1271	Fishing Industry Medical Scheme (Fishmed)	866	2,214	25.2	0.3	1.6	4,178	(3,331)	(928)	(199)	-	4	-	(276)	263
1086	Food Workers Medical Benefit Fund	13,739	19,030	30.4	0.3	0.4	15,976	(9,265)	(3,363)	-	-	-	-	3,348	5,791
1578	Foschini Group Medical Aid Scheme	2,517	5,179	29.9	5.4	1.1	50,226	(52,904)	(3,391)	(1,605)	-	(15)	-	(7,688)	(4,256)
1568	Gold Fields Medical Scheme	8,416	18,840	29.4	1.4	1.2	165,107	(154,214)	(17,123)	(4,983)	-	(48)	-	(11,261)	(1,000)



## Annexure K: Income statement details: registered schemes for the year ended 31 December 2009

Ref. no.	Name of medical scheme	Average members	Average beneficiaries	Average age pb	Pensioner ratio (65+ years)	No. of dependants per member	Gross contribution (risk + PMSA)	Gross relevant healthcare expenditure (gross + PMSA) (Note k)	Gross administration expenses (risk + PMSA)	Managed healthcare: management services	Broker fees (Note l)	Net impairment losses: trade and other receivables	Net reinsurance results	Net healthcare results	Net surplus/ (deficit) after consolidation results
				Years	%		R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
<b>Registered schemes: restricted continued</b>															
1270	Golden Arrow Employees Medical Benefit Fund	2,740	6,623	32.4	6.3	1.4	19,550	(31,492)	(3,408)	(1,318)	-	10	-	(16,658)	149
1598	Government Employees Medical Scheme (GEMS)	357,596	991,872	26.3	2.2	1.8	8,898,964	(8,094,085)	(416,367)	(160,976)	-	(15,499)	-	180,868	263,290
1523	Grintek Electronics Medical Aid Scheme	1,130	2,787	30.7	2.7	1.5	28,624	(30,919)	(2,814)	(741)	-	11	-	(5,756)	(3,055)
1111	IBM (SA) Medical Scheme	2,239	5,106	35.0	8.8	1.3	56,989	(54,897)	(5,666)	(1,264)	-	(4)	-	(4,564)	(2,937)
1591	Impala Medical Plan	7,707	16,513	30.4	2.1	1.1	51,648	(46,743)	(650)	-	-	-	-	4,255	4,322
1559	Imperial Group Medical Scheme	5,962	14,226	28.8	2.3	1.4	157,483	(149,273)	(14,684)	(2,720)	-	(361)	-	(9,302)	(9,212)
1145	LA-Health Medical Scheme	23,472	50,054	37.4	16.8	1.2	710,059	(624,591)	(62,575)	(14,429)	(10,612)	(1,488)	-	(7,412)	19,503
1197	Libcare Medical Scheme	5,633	12,785	29.5	5.1	1.3	170,493	(154,375)	(12,149)	(4,470)	-	(657)	-	(4,944)	8,025
1599	Lonrin Medical Scheme	13,710	14,538	35.7	0.0	0.1	70,764	(56,730)	(6,961)	(6,388)	-	(7)	-	678	3,911
1320	Malcor Medical Scheme	4,469	10,181	34.1	8.2	1.3	128,416	(132,096)	(12,511)	(2,797)	(56)	(83)	(214)	(19,682)	3,320
1495	Massmart Health Plan	2,140	4,655	30.7	2.2	1.2	66,777	(59,804)	(4,013)	(1,592)	-	(2)	-	(3,557)	1,957
1039	MBMed Medical Aid Fund	3,466	9,139	29.9	4.6	1.7	86,869	(90,780)	(5,381)	(2,686)	-	(11)	-	(11,989)	(3,384)
1588	MEDCOR	20,544	54,138	34.3	7.2	1.5	540,934	(551,861)	(38,715)	(16,634)	-	(18,221)	-	(84,496)	(71,454)
1548	Medipos Medical Scheme	10,733	23,239	35.5	13.9	1.2	280,334	(268,285)	(20,757)	(6,307)	-	(298)	-	(21,610)	12,640
1535	Metrocare	1,552	3,775	36.9	7.8	1.4	52,669	(54,758)	(2,997)	(1,123)	-	7	-	(6,202)	2,556
1105	Metropolitan Medical Scheme	5,580	13,442	27.5	4.2	1.4	126,981	(124,434)	(9,833)	(2,656)	-	1	-	(9,941)	1,839
1569	Minemed Medical Scheme	6,730	14,959	36.6	8.8	1.2	174,487	(168,462)	(10,233)	(3,752)	-	468	-	(7,492)	(7,285)
1566	Moremed Medical Scheme	1,408	2,514	25.6	2.3	0.8	12,067	(11,067)	(3,260)	(417)	-	(15)	-	(2,740)	(1,614)
1600	Motohealth Care	42,907	99,783	31.4	6.3	1.3	859,269	(762,348)	(78,695)	(20,083)	(849)	(4,614)	-	(7,320)	15,377
1154	Nampak SA Medical Scheme	5,220	12,451	35.0	9.4	1.4	158,213	(156,081)	(11,680)	(2,635)	-	13	-	(12,139)	8,181
1241	Naspers Medical Fund	6,630	13,187	32.6	5.7	1.0	153,821	(163,703)	(11,981)	(4,292)	-	1	-	(27,549)	(12,303)
1469	Nedgroup Medical Aid Scheme	25,047	48,932	33.2	9.4	1.0	509,512	(497,597)	(47,745)	(10,442)	-	(693)	-	(49,380)	37,091
1584	Netcare Medical Scheme	15,279	35,414	27.5	2.1	1.3	424,296	(385,043)	(22,876)	(9,862)	-	362	-	1,630	26,952
1214	Old Mutual Staff Medical Aid Fund	14,564	30,632	32.5	8.4	1.1	303,486	(288,140)	(27,039)	(7,082)	-	(1,120)	-	(18,576)	(4,303)
1441	Parmed Medical Aid Scheme	2,220	5,433	44.0	24.8	1.4	134,761	(119,029)	(5,743)	(519)	-	(979)	-	8,491	16,312
1515	PG Bison Medical Aid Society	656	1,412	39.2	15.4	1.2	20,173	(17,903)	(1,715)	(383)	-	(7)	-	165	2,379
1186	PG Group Medical Scheme	1,267	2,714	34.5	12.8	1.1	43,972	(38,320)	(2,386)	(629)	-	(26)	-	527	7,893
1563	Pick & Pay Medical Scheme	7,618	16,048	28.8	3.1	1.1	179,993	(149,607)	(13,614)	(4,831)	-	(62)	-	7,868	16,110
1583	Platinum Health	31,479	54,800	30.9	2.3	0.7	324,783	(365,396)	(26,430)	(752)	-	(445)	-	(68,248)	(27,324)
1194	Profmed	24,313	61,661	36.8	10.1	1.5	665,555	(610,862)	(68,903)	(15,301)	(4,115)	15	-	(33,611)	(1,368)



## Annexure K: Income statement details: registered schemes for the year ended 31 December 2009

Ref. no.	Name of medical scheme	Average members	Average beneficiaries	Average age pb	Pensioner ratio (65+ years)	No. of dependants per member	Gross contribution (risk + PMSA)	Gross relevant healthcare expenditure (gross + PMSA) (Note k)	Gross administration expenses (risk + PMSA)	Managed healthcare: management services	Broker fees (Note l)	Net impairment losses: trade and other receivables	Net reinsurance results	Net healthcare results	Net surplus/ (deficit) after consolidation results
				Years	%		R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
<b>Registered schemes: restricted continued</b>															
1516	Quantum Medical Aid Society	6,968	14,576	30.6	6.5	1.1	123,161	(117,002)	(13,877)	(3,932)	-	(315)	-	(11,145)	(993)
1201	Rand Water Medical Scheme	2,883	7,174	30.6	6.4	1.5	89,389	(91,304)	(4,781)	(1,132)	-	-	-	(7,828)	(36)
1430	Remedi Medical Aid Scheme	15,183	35,023	29.8	4.5	1.3	450,730	(407,345)	(26,922)	(5,988)	-	(31)	-	4,711	20,994
1176	Retail Medical Scheme	6,668	12,644	31.1	6.6	0.9	112,329	(91,639)	(12,410)	(3,902)	-	(38)	-	4,148	12,800
1013	Rhodes University Medical Scheme	991	2,125	39.0	14.3	1.2	23,181	(20,901)	(1,727)	(491)	-	10	-	72	1,931
1209	SA Breweries Medical Aid Society	9,307	21,352	28.5	4.1	1.3	226,778	(202,177)	(17,044)	(5,553)	-	(28)	-	(1,630)	20,103
1424	SABC Medical Aid Scheme	4,644	10,062	34.1	10.6	1.2	151,779	(140,856)	(7,312)	(3,232)	-	(31)	-	(7,088)	216
1038	SAMWUMed	29,983	72,991	30.2	3.8	1.4	487,426	(391,316)	(25,403)	(8,282)	(4,608)	(335)	-	57,482	83,486
1527	Sappl Medical Aid Scheme	4,125	9,584	36.0	12.6	1.3	139,360	(132,226)	(7,306)	(2,421)	-	(40)	-	(4,583)	2,625
1234	Sasolmed	27,916	73,443	30.4	4.7	1.6	936,305	(846,039)	(42,522)	(22,622)	-	(482)	-	24,640	63,798
1531	Sedmed	871	2,035	44.4	25.0	1.3	17,918	(17,563)	(585)	-	-	-	-	(230)	1,657
1243	Siemens Medical Scheme	2,985	6,748	33.0	7.9	1.3	96,678	(91,731)	(5,700)	(2,448)	-	(11)	-	(11,104)	(4,536)
1589	Solvita Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1580	South African Police Service Medical Scheme (POLMED)	166,903	471,285	25.5	2.3	1.8	4,282,465	(4,223,821)	(207,239)	(89,979)	-	(354)	-	(238,929)	(79,164)
1254	Stocksmed	892	1,910	34.6	6.9	1.2	27,687	(28,390)	(1,917)	(750)	-	(15)	-	(4,893)	(2,018)
1544	Tiger Brands Medical Scheme	5,014	11,576	38.3	16.2	1.3	155,517	(151,806)	(8,076)	(3,462)	-	(84)	-	(7,911)	1,356
1582	Transmed Medical Fund	74,705	146,985	43.6	22.6	1.0	1,289,223	(1,367,876)	(105,210)	(36,570)	-	(385)	-	(219,217)	(171,486)
1579	Tsogo Sun Group Medical Scheme	2,940	6,243	25.9	2.1	1.1	64,522	(54,430)	(6,922)	(1,705)	-	3	-	329	4,795
1434	Umed	8,071	18,843	40.9	13.2	1.3	270,421	(250,680)	(16,965)	(8,194)	-	(654)	-	(6,072)	7,897
1597	Umvuzo Health Medical Scheme	17,365	32,209	30.0	0.4	0.9	169,050	(138,791)	(18,158)	(5,280)	(5,479)	(49)	-	1,486	4,327
1520	University of Kwa-Zulu Natal Medical Scheme	3,258	7,022	37.5	13.5	1.2	81,216	(76,069)	(7,661)	(1,934)	-	0	-	(8,139)	172
1282	University of the Witwatersrand Staff Medical Aid Scheme	2,973	6,270	38.6	14.2	1.1	95,734	(92,458)	(6,165)	(2,159)	-	(22)	-	(5,071)	(528)
1291	Witbank Coalfields Medical Aid Scheme	10,308	25,817	29.4	4.0	1.5	264,630	(233,590)	(10,900)	(1,825)	-	(62)	-	9,765	35,561
1293	Wooltru Healthcare Fund	8,829	18,153	28.6	4.3	1.1	166,285	(159,001)	(16,661)	(3,021)	-	(36)	-	(12,433)	2,556
1253	Xstrata Medical Aid Scheme	7,668	22,356	32.8	0.2	2.0	150,061	(150,316)	(10,202)	(5,050)	-	(88)	-	(15,595)	(7,543)
<b>Sub-total: registered restricted schemes</b>		<b>1,297,145</b>	<b>3,115,571</b>	<b>29.7</b>	<b>5.3</b>	<b>1.4</b>	<b>30,509,043</b>	<b>(28,633,583)</b>	<b>(1,955,854)</b>	<b>(647,110)</b>	<b>(27,575)</b>	<b>(47,706)</b>	<b>166</b>	<b>(920,245)</b>	<b>681,508</b>
<b>Total registered schemes</b>		<b>3,434,445</b>	<b>7,946,207</b>	<b>31.6</b>	<b>6.5</b>	<b>1.3</b>	<b>84,863,217</b>	<b>(76,308,352)</b>	<b>(7,507,099)</b>	<b>(1,935,557)</b>	<b>(1,197,596)</b>	<b>(176,630)</b>	<b>638</b>	<b>(2,587,760)</b>	<b>963,871</b>

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Annexure K: Income statement details: registered schemes for the year ended 31 December 2009

Notes

- a An encumbered asset was excluded in the calculation of the solvency ratio.
- b The scheme was registered in 2005 and a phase-in solvency ratio of 22.0% applies.
- c The scheme was registered in 2006 and a phase-in solvency ratio of 17.5% applies.
- d The scheme was registered in 2007 and a phase-in solvency ratio of 13.5% applies.
- e The scheme was registered in 2008 and a phase-in solvency ratio of 13.5% applies.
- f The scheme was registered in 2009 and a phase-in solvency ratio of 10.0% applies.
- g Government Employees Medical Scheme (GEMS) was registered on 1 January 2005 but only started operations with effect from 1 January 2006.
- h Solvita Medical Scheme was registered with effect from 1 January 2008. The scheme was subsequently liquidated on 16 January 2009.
- i Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- j Stocksmmed was liquidated with effect from 31 December 2009.
- k Including managed care: healthcare benefits
- l Including broker service fees and other distribution costs paid

PMSA = Personal Medical Savings Account

pb = per beneficiary

- The scheme liquidated in 2009. Figures were submitted.
- Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- Stocksmmed was liquidated with effect from 31 December 2009.

- The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.

## Annexure L: Balance sheet details: registered schemes as at 31 December 2009

	Members	Dependents	Beneficiaries	Non-current assets	Current assets	Trade and other receivables	Cash and cash equivalents	Total assets	Members funds	Accumulated funds	Non-current liabilities	Current liabilities	Trade and other payables	Savings liability	Outstanding claims provision	Net assets (members' funds per balance sheet)	Total assets: total liabilities	Current assets: current liabilities	Cash and cash equivalents: gross relevant healthcare expenditure incurred coverage	Net assets per Regulation 29 of the Medical Schemes Act 131 of 1998	Solvency ratio
Ref no.	Name of medical scheme	As at 31.12.2009	As at 31.12.2009	As at 31.12.2009	R'000	R'000	R'000	Days outstanding	R'000	R'000	R'000	R'000	R'000	Days outstanding	R'000	R'000	Prior year claims provision utilised %	R'000	Months	R'000	%
<b>Registered schemes: open</b>																					
I252	Bestmed Medical Scheme	40,801	49,840	90,641	344,446	415,890	8,537	3.0	407,353	760,335	543,171	451,831	1,458	215,707	41,548	21.0	150,559	23,600	99.6	543,171	43.4
I512	Bonitas Medical Fund	279,546	371,300	650,846	1,209,508	1,778,109	340,134	20.0	1,336,379	2,987,617	2,327,159	2,231,586	-	660,458	370,202	23.9	33,632	256,624	101.1	2,327,159	35.7
I034	Cape Medical Plan	6,800	8,443	15,243	112,817	97,293	2,499	7.5	94,794	210,109	191,493	158,113	-	18,616	3,914	14.1	9,202	5,500	86.1	191,493	129.8
I552	Community Medical Aid Scheme (COMMED)	12,869	17,397	30,266	49,103	65,525	13,860	13.4	51,666	114,628	79,087	74,005	-	35,542	6,662	7.0	-	28,880	85.0	79,087	19.7
I491	Compicare Wellness Medical Scheme	13,353	17,234	30,587	6,776	189,961	20,996	17.5	166,719	196,737	127,389	123,184	-	69,348	26,392	22.8	26,981	15,975	101.4	127,389	27.9
I125	Discovery Health Medical Scheme	917,580	1,124,328	2,041,908	125,641	8,472,291	828,860	12.7	1,124,055	8,597,931	6,070,680	6,070,680	335	2,526,916	509,303	12.2	1,544,102	473,511	99.5	6,070,680	25.5
I202	Fedhealth Medical Scheme	86,120	100,326	186,446	480,199	485,845	138,929	22.5	346,916	966,044	605,208	581,206	-	360,836	43,412	8.4	228,260	89,164	100.3	605,208	25.8
I554	Genesis Medical Scheme	7,194	13,696	20,890	17,711	179,540	1,006	2.3	178,534	197,251	176,788	173,044	-	20,462	5,374	17.3	7,522	7,566	87.4	176,788	106.2
I561	Gen-Health Medical Scheme	12,577	17,883	30,460	459	96,119	4,235	6.3	91,884	96,578	52,508	52,508	-	44,070	21,460	31.9	11,487	11,123	106.3	52,508	21.5
I466	Good Hope Medical Aid Society	3,437	5,182	8,619	257	47,429	412	3.8	47,017	47,686	44,279	44,032	-	3,406	3,231	31.9	-	175	100.1	44,279	110.2
I537	Hosmed Medical Aid Scheme	32,411	59,487	91,898	164	173,948	14,540	6.3	12,230	174,112	103,498	103,498	-	70,614	16,903	9.1	-	53,711	101.9	103,498	12.4
I577	Ingwe Health Plan	13,676	5,522	19,198	-	44,486	1,695	4.0	42,791	44,486	18,622	18,622	-	25,864	19,684	58.6	476	5,704	96.9	18,622	12.0
I087	Keyhealth	44,401	58,134	102,535	289,209	242,155	124,051	29.9	118,104	531,364	244,663	234,997	3,423	283,278	115,190	30.8	80,538	87,550	98.9	244,663	14.7
I576	Liberty Health Medical Scheme	44,985	50,188	95,173	161,382	168,194	19,861	6.8	147,454	329,575	212,972	209,462	-	116,603	18,859	7.8	39,402	58,342	119.1	212,972	19.5
I549	Medicover	37,768	54,217	91,985	21,566	738,463	64,187	23.5	550,202	760,029	402,642	394,282	-	357,387	89,110	41.4	229,777	38,500	98.4	402,642	39.2
I149	Medihelp	112,678	107,562	220,240	254,212	1,126,888	93,021	10.5	1,033,866	1,381,100	1,110,563	1,030,209	45,499	225,038	87,186	10.6	22,750	115,102	100.2	1,110,563	31.5
I506	Medimed Medical Scheme	4,236	6,875	11,111	-	104,515	6,441	25.7	98,074	104,515	91,193	91,193	-	13,323	2,493	13.4	7,029	3,800	98.3	91,193	99.6

## Annexure L: Balance sheet details: registered schemes as at 31 December 2009

	Members	Depen-	Bene-	Non-	Current	Trade	Cash	Total	Members	Accumu-	Non-	Current	Trade and	Savings	Outstanding	Net	Total	Current	Cash and	Net	Solvency				
		dants	ficiaries	current	assets	and other	and cash	assets	funds	lated	current	liabilities	other payables	liability	claims	assets	assets:	assets:	and cash	assets per					
				assets		receivables	equivalents			funds	liabilities				provision	(members' funds per balance sheet)	total liabilities	current liabilities	equivalents gross relevant healthcare expenditure incurred coverage	Regulation 29 of the Medical Schemes Act 131 of 1998					
Ref no.	Name of medical scheme	As at 31.12.2009	As at 31.12.2009	As at 31.12.2009	R'000	R'000	R'000	Days out-standing	R'000	R'000	R'000	R'000	R'000	R'000	R'000	Prior year claims provision utilised %	R'000		Months	R'000	%				
Registered schemes: open continued																									
1140	Medshield Medical Scheme	73,031	100,607	173,638	887,735	203,264	20,478	5.0	182,786	1,090,999	850,316	776,817	-	240,683	134,092	35.6	16,591	90,000	96.7	850,316	4.5	0.8	1.6	776,817	52.0
1167	Momentum Health	81,645	98,707	180,352	-	540,330	28,062	5.4	317,130	540,330	307,102	307,102	-	233,228	27,726	7.0	84,740	20,762	102.8	307,102	2.3	2.3	3.7	299,157	15.8
1166	National Independent Medical Aid Society (NIMAS)	13,841	15,899	29,740	4,786	86,772	6,485	6.9	80,287	91,557	44,615	44,615	-	46,942	13,876	17.7	16,043	17,024	76.6	44,615	2.0	1.8	3.0	44,602	13.0
1215	Oxygen Medical Scheme	58,477	75,383	133,860	303,431	34,421	8,842	2.1	25,579	337,852	179,958	171,544	-	157,895	29,809	8.3	53,896	74,190	97.1	179,958	2.1	0.2	0.2	171,544	11.2
1546	Pharos Medical Plan	7,172	9,487	16,659	-	64,966	3,402	5.9	61,564	64,966	44,434	44,434	-	20,532	3,086	7.0	2,942	14,504	78.1	44,434	3.2	3.2	4.5	44,434	21.2
1454	Pro Sano Medical Scheme	31,583	38,480	70,063	142,949	320,602	18,133	8.4	301,698	463,551	251,644	230,993	-	211,907	33,618	18.3	144,226	34,063	104.7	251,644	2.2	1.5	4.6	219,767	28.1
1196	Protea Medical Aid Society	6,197	949	7,146	44	20,627	2,932	22.2	3,012	20,671	9,248	9,248	-	11,423	6,304	46.1	-	5,119	104.3	9,248	1.8	1.8	4.3	9,146	19.0
1170	Purehealth Medical Scheme	3,218	3,413	6,631	-	27,649	2,910	7.9	24,739	27,649	10,269	10,269	-	17,380	2,685	8.4	9,195	5,500	102.6	10,269	1.6	1.6	2.4	10,269	7.6
1575	Resolution Health Medical Scheme	33,111	41,101	74,212	1,721	176,425	10,783	6.4	165,642	178,146	98,599	98,599	-	79,546	24,452	19.2	25,594	29,500	83.7	98,599	2.2	2.2	4.2	98,599	16.0
1446	Selfmed Medical Scheme	11,253	12,386	23,639	499	155,782	1,654	2.1	11,784	156,282	128,223	128,223	59	28,000	8,834	12.3	102	19,064	101.6	128,223	5.6	5.6	7.0	125,622	43.1
1486	Sizwe Medical Fund	62,034	94,388	156,422	344,291	457,986	112,284	26.0	147,461	802,276	632,729	602,482	77	169,470	117,370	30.2	-	52,100	80.8	632,729	4.7	2.7	2.9	602,482	38.3
1141	Spectramed	49,031	58,182	107,213	52,546	288,747	72,824	18.3	215,922	341,293	257,543	247,133	-	83,750	15,769	4.5	18	67,963	118.2	257,543	4.1	3.4	2.0	247,133	17.0
1464	Suremed Health	1,551	2,135	3,686	-	42,334	2,608	23.4	19,446	42,334	31,027	31,027	-	11,307	3,162	34.8	6,345	1,800	85.6	31,027	3.7	3.7	13.9	31,027	76.3
1147	Telemed	24,844	27,603	52,447	12,489	243,136	13,161	5.0	127,231	255,625	138,408	129,805	10,837	106,380	48,503	21.7	22,467	35,410	120.9	138,408	2.2	2.3	3.3	129,805	13.5
1592	Thebemed	4,382	10,351	14,733	41	16,835	1,464	6.3	15,372	16,876	12,086	12,086	-	4,791	800	4.2	-	3,991	65.1	12,086	3.5	3.5	2.7	12,086	14.3
1422	Topmed Medical Scheme	12,567	14,280	26,847	37,864	109,941	3,879	4.8	60,382	147,805	112,355	111,034	-	35,450	8,481	12.7	9,178	17,790	96.3	112,355	4.2	3.1	4.8	109,738	37.0
Sub-total: registered open schemes		2,144,369	2,670,965	4,815,334	4,861,840	17,216,468	1,993,164	13.4	7,608,074	22,078,308	15,510,469	14,997,861	61,687	6,506,152	1,859,489	16.3	2,783,054	1,863,609	99.7	15,510,469	3.4	2.6	3.8	14,917,370	27.4

## Annexure L: Balance sheet details: registered schemes as at 31 December 2009

	Members	Depen- dants	Bene- ficiaries	Non- current assets	Current assets	Trade and other receivables	Cash and cash equivalent	Total assets	Members funds	Accumu- lated funds	Non- current liabilities	Current liabilities	Trade and other payables	Savings liability	Outstanding claims provision	Net assets (members' funds per balance sheet)	Total assets: total liabilities	Current assets: current liabilities	Cash and cash equivalents gross relevant healthcare expenditure incurred coverage	Net assets per Regulation 29 of the Medical Schemes Act 131 of 1998	Solvency ratio				
Ref no.	Name of medical scheme	As at 31.12.2009	As at 31.12.2009	As at 31.12.2009	R'000	R'000	R'000	Days out- standing	R'000	R'000	R'000	R'000	R'000	R'000	Days out- standing	R'000	R'000	Prior year claims provision utilised %	R'000		Months	R'000	%		
Registered schemes: restricted																									
1005	AECI Medical Aid Society	7,323	8,108	15,431	154,456	31,607	204	0.3	31,403	186,063	171,050	157,922	-	15,013	1,263	2.0	-	13,750	112.1	171,050	12.4	2.1	1.7	157,922	67.7
1487	Afrisan SA Medical Scheme	1,149	1,299	2,448	-	28,366	326	3.1	27,794	28,366	18,168	17,974	-	10,197	2,277	26.2	6,770	1,150	106.0	18,168	2.8	2.8	8.6	17,974	46.2
1567	Afrox Medical Aid Society	3,276	4,282	7,558	110,763	7,999	5,716	25.6	2,283	118,762	115,024	114,879	-	3,738	1,305	6.1	-	2,433	101.9	115,024	31.8	2.1	0.3	114,879	141.1
1456	Alliance Midmed Medical Scheme	1,866	2,952	4,818	-	68,778	1,538	10.2	44,618	68,778	48,016	48,016	-	20,761	1,543	12.1	16,758	2,460	97.2	48,016	3.3	3.3	15.7	48,016	87.6
1534	Altron Medical Aid Scheme	4,236	5,208	9,444	46,747	39,597	984	2.7	12,769	86,344	38,904	40,418	-	47,440	1,009	3.4	35,431	11,000	104.7	38,904	1.8	0.8	3.4	38,904	29.5
1012	Anglo Medical Scheme	11,746	15,172	26,918	100,801	1,961,644	8,572	7.9	781,579	2,062,445	1,957,603	1,957,603	-	104,843	3,273	3.5	81,819	19,751	99.6	1,957,603	19.7	18.7	58.7	1,815,927	458.5
1571	Anglovaal Group Medical Scheme	4,289	4,516	8,805	75,419	70,037	2,507	7.4	67,530	145,457	111,107	105,620	-	34,350	4,559	19.3	27,691	2,100	96.6	111,107	4.2	2.0	7.0	105,620	85.1
1279	Bankmed	100,505	99,451	199,956	599,105	1,235,871	51,382	7.7	1,032,345	1,834,976	1,395,473	1,249,925	5,308	434,195	17,183	3.3	321,736	95,276	98.4	1,395,473	4.2	2.8	6.3	1,249,925	51.1
1507	Barloworld Medical Scheme	5,865	6,640	12,505	86,416	74,088	2,008	3.5	72,080	160,504	122,173	115,464	16,980	21,351	11,396	20.6	-	9,954	92.9	122,173	4.2	3.5	4.3	115,464	54.9
1526	BMW Employees Medical Aid Society	2,221	3,916	6,137	48,134	15,196	411	2.3	14,784	63,330	53,915	52,916	-	9,415	1,417	7.5	4,399	3,600	70.0	53,915	6.7	1.6	2.3	52,916	79.4
1237	BP Medical Aid Society	2,367	2,993	5,360	51,813	7,318	1,287	7.6	6,031	59,132	53,937	54,399	-	5,195	538	2.7	-	4,656	90.6	53,937	11.4	1.4	1.0	53,937	87.7
1590	Building & Construction Industry Medical Aid Fund	5,036	7,618	12,654	460	43,372	863	5.6	42,509	43,832	38,254	37,858	-	5,579	969	7.4	-	4,610	102.5	38,254	7.9	7.8	10.7	37,858	67.1
1593	Built Environment Professional Associations Medical Scheme (BEPMED)	2,070	2,700	4,770	-	12,823	3,756	25.0	9,066	12,823	5,537	5,537	-	7,286	485	4.6	3,549	3,252	102.1	5,537	1.8	1.8	2.3	5,537	10.1
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	23,768	17,494	41,262	248,623	146,005	8,622	5.5	137,383	394,629	300,313	223,992	-	94,315	13,449	10.8	56,866	24,000	110.8	300,313	4.2	1.5	3.3	223,992	39.4
1521	Clicks Group Medical Scheme	644	669	1,313	-	9,343	144	4.1	9,199	9,343	8,174	8,174	-	1,169	752	25.0	17	400	107.0	8,174	8.0	8.0	10.0	8,174	64.3





## Annexure L: Balance sheet details: registered schemes as at 31 December 2009

Ref no.	Name of medical scheme	Members As at 31.12.2009	Dependants As at 31.12.2009	Beneficiaries As at 31.12.2009	Non-current assets R'000	Current assets R'000	Trade and other receivables R'000	Days out- standing	Cash and cash equivalents R'000	Total assets R'000	Members funds R'000	Accumulated funds R'000	Non-current liabilities R'000	Current liabilities R'000	Trade and other payables R'000	Days out- standing	Savings liability R'000	Outstanding claims provision R'000	Prior year claims provision utilised %	Net assets (members' funds per balance sheet) R'000	Total assets: total liabilities	Current assets: current liabilities	Cash and and cash equivalents gross relevant healthcare expenditure incurred coverage	Net assets per Regulation 29 of the Medical Schemes Act 131 of 1998 R'000	Solvency ratio %
Registered schemes: restricted continued																									
1068	De Beers Benefit Society	7,092	8,888	15,980	320	358,030	7,316	11.9	156,919	358,350	325,897	325,897	9,305	23,147	9,747	15.7	-	13,400	96.7	325,897	11.0	15.5	18.6	288,771	129.1
1484	Edcon Medical Aid Scheme	3,669	3,689	7,358	-	35,585	1,118	5.2	34,466	35,585	24,512	24,512	-	11,073	2,576	16.7	6,447	2,050	90.5	24,512	3.2	3.2	5.8	24,512	31.1
1572	Engen Medical Benefit Fund	3,551	4,706	8,257	24,492	65,600	520	1.6	29,066	90,092	73,917	63,450	-	16,174	956	3.8	9,603	5,616	97.7	73,917	5.6	4.1	7.3	63,676	55.0
1585	Eyethumed Medical Scheme	3,303	3,433	6,736	5,063	21,831	1,014	11.0	20,817	26,894	22,195	22,134	-	4,699	2,546	27.4	-	2,153	86.6	22,195	5.7	4.6	7.4	22,134	65.6
1271	Fishing Industry Medical Scheme (Fishmed)	838	1,307	2,145	2,000	5,015	502	43.8	4,513	7,014	6,479	6,470	-	535	242	26.5	-	293	48.9	6,479	13.1	9.4	16.3	6,470	154.8
1086	Food Workers Medical Benefit Fund	14,412	5,426	19,838	65,287	2,192	2,002	45.7	163	67,479	66,881	56,414	-	598	598	23.6	-	-	#DIV/0!	66,881	112.8	3.7	0.2	56,414	353.1
1578	Foschini Group Medical Aid Scheme	2,632	2,836	5,468	25,941	12,122	296	2.2	11,827	38,063	35,493	33,407	-	2,571	281	1.9	-	2,290	88.5	35,493	14.8	4.7	2.7	33,407	66.5
1568	Gold Fields Medical Scheme	8,856	10,972	19,828	574	130,642	1,831	4.0	95,034	131,216	117,446	117,446	-	13,770	5,370	12.7	-	8,400	110.1	117,446	9.5	9.5	10.0	117,446	71.1
1270	Golden Arrow Employees Medical Benefit Fund	2,733	3,774	6,507	17,306	6,167	4,565	85.2	1,602	23,474	19,848	19,517	-	3,626	1,312	15.2	-	2,314	98.8	19,848	6.5	1.7	0.6	19,517	99.8
1598	Government Employees Medical Scheme (GEMS)	409,804	738,093	1,147,897	1,794	1,791,011	167,501	6.9	1,623,510	1,792,805	986,269	986,269	48	806,488	421,476	19.4	67,076	317,936	99.8	986,269	2.2	2.2	2.4	986,269	11.1
1523	Grintek Electronics Medical Aid Scheme	1,140	1,677	2,817	5,984	23,235	2,005	25.6	21,230	29,219	26,518	26,141	-	2,701	1,969	23.3	172	560	100.9	26,518	10.8	8.6	8.2	26,141	91.3
1111	IBM (SA) Medical Scheme	2,243	2,843	5,086	-	24,805	358	2.3	24,447	24,805	15,402	15,402	-	9,402	1,948	16.1	6,055	1,400	145.2	15,402	2.6	2.6	5.3	15,402	27.0
1591	Impala Medical Plan	7,526	8,508	16,034	16,493	2,656	1,857	13.1	800	19,150	16,925	14,632	-	2,224	378	2.9	-	1,847	100.0	16,925	8.6	1.2	0.2	14,632	28.3
1559	Imperial Group Medical Scheme	6,118	8,408	14,526	121,383	62,757	8,158	18.9	54,599	184,140	170,189	152,478	-	13,951	6,799	16.7	952	6,200	111.3	170,189	13.2	4.5	4.4	152,478	96.8
1145	LA-Health Medical Scheme	24,605	28,257	52,862	3,285	348,272	21,303	11.0	325,011	351,557	239,584	239,584	2,997	108,976	17,358	12.5	75,818	15,800	97.0	239,584	3.1	3.2	6.3	238,002	33.5

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## Annexure L: Balance sheet details: registered schemes as at 31 December 2009

Ref no.	Name of medical scheme	Members As at 31.12.2009	Dependents As at 31.12.2009	Beneficiaries As at 31.12.2009	Non-current assets R'000	Current assets R'000	Trade and other receivables R'000	Days out-standing	Cash and cash equivalents R'000	Total assets R'000	Members funds R'000	Accumulated funds R'000	Non-current liabilities R'000	Current liabilities R'000	Trade and other payables R'000	Days out-standing	Savings liability R'000	Outstanding claims provision R'000	Prior year claims provision utilised %	Net assets (members' funds per balance sheet) R'000	Total assets: total liabilities R'000	Current assets: current liabilities R'000	Cash and cash equivalents: gross relevant healthcare expenditure incurred coverage Months	Net assets per Regulation of the Medical Schemes Act 131 of 1998 R'000	Solvency ratio %
<b>Registered schemes: restricted continued</b>																									
I197	Libcare Medical Scheme	5,702	7,128	12,830	138,698	39,906	3,304	7.1	36,602	178,605	131,400	131,400	-	47,204	2,579	7.6	36,726	7,900	109.9	131,400	3.8	0.8	2.8	131,400	77.1
I599	Lonmin Medical Scheme	13,840	952	14,792	-	18,398	425	2.2	17,973	18,398	13,431	13,431	-	4,967	3,317	21.3	-	1,650	96.7	13,431	3.7	3.7	3.8	13,431	19.0
I547	Malcor Medical Scheme	4,599	5,913	10,512	33,651	27,523	144	0.4	27,379	61,174	40,187	35,161	-	20,986	5,055	14.1	1,685	14,246	100.7	40,187	2.9	1.3	2.5	35,161	27.4
I495	Massmart Health Plan	2,189	2,608	4,797	20,449	55,070	1,700	9.3	53,370	75,519	47,919	49,528	-	27,599	488	3.7	24,612	2,500	90.7	47,919	2.7	2.0	10.7	47,919	71.8
I039	MBMed Medical Aid Fund	3,303	5,443	8,746	-	62,869	7,866	33.0	55,004	62,869	56,905	56,905	-	5,964	577	2.3	-	5,388	98.9	56,905	10.5	10.5	7.3	56,905	65.5
I588	MEDCOR	15,922	24,591	40,513	14	112,664	23,751	16.0	88,913	112,678	59,052	59,052	-	53,625	20,325	13.4	-	33,300	114.0	59,052	2.1	2.1	1.9	59,052	10.9
I548	Medipos Medical Scheme	10,702	12,429	23,131	273,343	77,618	15,999	20.8	61,619	350,961	282,568	(51,789)	-	68,393	8,657	15.0	45,786	13,950	114.1	282,568	5.1	1.1	2.8	257,352	91.8
I535	Metrocare	1,484	2,100	3,584	65,858	43,130	5,013	34.7	38,117	108,988	105,877	93,099	-	3,111	542	3.6	-	2,569	99.0	105,877	35.0	13.9	8.4	93,099	176.8
I105	Metropolitan Medical Scheme	5,734	7,970	13,704	111,946	9,245	388	1.1	8,857	121,191	114,878	87,827	-	6,313	1,607	4.7	-	4,706	93.6	114,878	19.2	1.5	0.9	87,827	69.2
I569	Minemed Medical Scheme	6,598	7,997	14,595	411	34,649	699	1.5	33,949	35,059	20,030	20,030	-	15,030	5,030	10.9	-	10,000	88.2	20,030	2.3	2.3	2.4	20,030	11.5
I566	Moremed Medical Scheme	1,380	1,066	2,446	8,393	2,102	413	12.5	1,689	10,496	9,398	8,890	-	1,098	405	13.6	216	477	82.5	9,398	9.6	1.9	1.8	7,890	65.4
I600	Motohealth Care	39,116	51,780	90,896	313	387,801	41,178	17.5	346,623	388,114	330,789	330,789	-	57,325	9,241	4.40	-	48,084	97.6	330,789	6.8	6.8	5.5	330,789	38.5
I154	Nampak SA Medical Scheme	5,250	7,254	12,504	-	187,110	1,463	3.4	33,862	187,110	149,206	149,206	-	37,904	1,527	3.9	27,970	8,407	103.4	149,206	4.9	4.9	14.3	102,382	64.7
I241	Naspers Medical Fund	6,444	6,351	12,795	55,268	86,005	2,024	4.8	83,981	141,274	98,525	98,525	-	42,748	11,809	31.3	24,448	6,491	77.3	98,525	3.3	2.0	6.2	79,286	51.5
I469	Nedgroup Medical Aid Scheme	24,963	23,932	48,895	246,592	819,327	12,669	9.1	23,236	1,065,919	229,986	254,961	783,422	52,511	6,303	4.9	15,823	30,385	100.5	229,986	1.3	15.6	19.5	229,986	45.1
I584	Netcare Medical Scheme	15,780	20,929	36,709	-	348,099	32,889	28.3	94,677	348,099	240,666	240,666	-	107,433	35,148	39.1	46,993	25,292	96.5	240,666	3.2	3.2	9.8	229,252	54.0
I214	Old Mutual Staff Medical Aid Fund	14,422	15,676	30,098	170,692	14,967	4,748	5.7	10,219	185,658	131,570	124,544	-	54,088	4,692	6.2	32,334	17,062	94.3	131,570	3.4	0.3	0.4	124,544	41.0
I441	Parmed Medical Aid Scheme	2,304	3,315	5,619	78,763	38,300	2,125	5.8	36,175	117,063	101,252	88,533	-	15,811	8,252	25.3	-	7,559	104.5	101,252	7.4	2.4	3.6	88,533	65.7
I515	PG Bison Medical Aid Society	635	733	1,368	-	29,613	1,443	26.1	28,171	29,613	27,479	27,479	-	2,134	749	15.3	-	1,385	106.5	27,479	13.9	13.9	18.9	27,479	136.2



## Annexure L: Balance sheet details: registered schemes as at 31 December 2009

		Members	Depen- dants	Bene- ficiaries	Non- current assets	Current assets	Trade and other receivables	Cash and cash equivalents	Total assets	Members funds	Accumu- lated funds	Non- current liabilities	Current liabilities	Trade and other payables	Savings liability	Outstanding claims provision	Net assets (members' funds per balance sheet)	Total assets: total liabilities	Current assets: current liabilities	Cash and cash equivalents: gross relevant healthcare expenditure incurred coverage	Net assets per Regulation 29 of the Medical Schemes Act 131 of 1998	Solvency ratio			
Ref no.	Name of medical scheme	As at 31.12.2009	As at 31.12.2009	As at 31.12.2009	R'000	R'000	R'000	Days out- standing	R'000	R'000	R'000	R'000	R'000	R'000	Days out- standing	R'000	R'000	Prior year claims provision utilised %	R'000		Months	R'000	%		
Registered schemes: restricted continued																									
1186	PG Group Medical Scheme	1,239	1,402	2,641	-	75,380	2,988	24.8	15,892	75,380	56,996	56,996	-	18,384	4,248	52.5	12,301	1,835	76.9	56,996	4.1	4.1	22.7	48,479	110.3
1563	Pick & Pay Medical Scheme	7,695	8,629	16,324	164,769	120,474	178	0.4	120,296	285,243	233,994	145,960	-	51,249	773	2.6	45,019	5,457	96.1	233,994	5.6	2.4	9.6	145,960	81.1
1583	Platinum Health	31,798	23,449	55,247	-	173,812	13,418	15.1	35,334	173,812	109,135	109,135	2,940	61,737	39,729	39.7	9	22,000	99.3	109,135	2.7	2.8	5.3	104,013	32.0
1194	Profmed	24,546	37,448	61,994	110,420	263,797	2,727	1.5	140,958	374,217	318,382	300,160	-	55,835	23,984	14.3	-	31,851	84.7	318,382	6.7	4.7	5.1	300,160	45.1
1516	Quantum Medical Aid Society	6,948	7,562	14,510	159,487	11,905	1,796	5.3	10,109	171,392	155,544	141,173	-	15,848	3,527	13.5	10,021	2,300	109.9	155,544	10.8	0.8	1.0	141,173	114.6
1201	Rand Water Medical Scheme	2,900	4,320	7,220	-	93,976	2,117	8.6	91,858	93,976	85,684	85,684	-	8,291	6,091	24.3	-	2,200	120.4	85,684	11.3	11.3	12.1	85,684	95.9
1430	Remedi Medical Aid Scheme	15,484	20,236	35,720	192,925	128,991	6,346	5.1	122,645	321,916	225,469	221,697	-	96,446	2,613	2.6	79,545	14,288	95.0	225,469	3.3	1.3	3.6	221,697	49.2
1176	Retail Medical Scheme	6,951	6,169	13,120	-	159,072	401	1.3	51,094	159,072	134,346	110,647	-	24,726	12,434	56.7	9,392	2,900	109.0	134,346	6.4	6.4	20.8	110,647	98.5
1013	Rhodes University Medical Scheme	1,004	1,160	2,164	-	23,245	2,099	33.0	21,146	23,245	21,571	21,571	-	1,674	374	6.5	-	1,300	88.8	21,571	13.9	13.9	12.1	21,571	93.1
1209	SA Breweries Medical Aid Society	9,435	12,079	21,514	144,257	115,191	2,061	3.3	80,515	259,448	210,519	198,341	-	48,929	3,412	6.7	32,129	13,388	89.9	210,519	5.3	2.4	6.7	198,341	87.5
1424	SABC Medical Aid Scheme	4,604	5,454	10,058	91,421	92,164	1,908	4.6	90,255	183,584	93,996	77,085	-	89,588	15,441	44.9	67,848	6,300	102.3	93,996	2.0	1.0	7.7	77,085	50.8
1038	SAMWUMed	30,271	42,813	73,084	16,224	324,817	8,068	6.0	96,798	341,041	296,636	291,650	2,304	42,102	11,749	11.0	-	30,353	44.8	296,636	7.7	7.7	9.7	291,650	59.8
1527	Sappi Medical Aid Scheme	4,086	5,357	9,443	50,139	32,096	9,036	23.7	23,059	82,235	59,590	59,581	-	22,645	312	1.0	17,681	4,651	97.6	59,590	3.6	1.4	2.1	59,581	42.8
1234	Sasolmed	28,227	46,376	74,603	142,402	341,199	55,961	21.8	176,168	483,601	449,759	436,855	-	33,842	5,117	2.2	-	28,725	96.1	449,759	14.3	10.1	4.0	436,855	46.7
1531	Sedmed	865	1,158	2,023	13,338	2,519	660	13.5	1,330	15,856	12,398	12,397	-	3,458	754	15.7	-	2,704	118.6	12,398	4.6	0.7	1.3	12,397	69.2
1243	Siemens Medical Scheme	2,965	3,779	6,744	67,418	41,480	7,623	28.8	33,857	108,898	53,691	50,300	-	55,207	908	4.4	49,593	4,706	90.4	53,691	2.0	0.8	4.4	50,300	52.0
1589	Solvia Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1580	South African Police Service Medical Scheme (POLMED)	168,576	303,737	472,313	211,965	1,374,914	13,772	1.2	1,337,612	1,586,879	1,265,721	1,265,721	648	320,510	133,631	11.5	-	186,879	112.0	1,265,721	4.9	4.3	3.9	1,249,025	29.2

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## Annexure L: Balance sheet details: registered schemes as at 31 December 2009

Ref no.	Name of medical scheme	Members As at 31.12.2009	Dependents As at 31.12.2009	Beneficiaries As at 31.12.2009	Non-current assets R'000	Current assets R'000	Trade and other receivables R'000	Days outstanding	Cash and cash equivalents R'000	Total assets R'000	Members funds R'000	Accumulated funds R'000	Non-current liabilities R'000	Current liabilities R'000	Trade and other payables R'000	Days outstanding	Savings liability R'000	Outstanding claims provision R'000	Prior year claims provision utilised %	Net assets (members' funds per balance sheet) R'000	Total assets: total liabilities R'000	Current assets: current liabilities R'000	Cash and cash equivalents: gross relevant healthcare expenditure incurred coverage Months	Net assets per Regulation 29 of the Medical Schemes Act 131 of 1998 R'000	Solvency ratio %
<b>Registered schemes: restricted continued</b>																									
1254	Stocksmed	860	986	1,846	-	37,126	1,525	20.1	35,601	37,126	25,594	25,594	-	11,533	111	1.8	9,727	1,695	98.4	25,594	3.2	3.2	15.0	25,594	92.4
1544	Tiger Brands Medical Scheme	4,972	6,510	11,482	23,498	84,825	5,166	12.1	79,659	108,322	92,764	63,933	1,000	14,558	8,300	20.0	-	6,258	94.8	92,764	7.0	5.8	6.3	80,270	51.6
1582	Transmed Medical Fund	73,523	70,763	144,286	397,076	105,825	12,082	3.4	93,743	502,901	382,373	372,083	-	120,528	8,298	2.4	57,971	54,259	109.9	382,373	4.2	0.9	0.8	372,083	28.9
1579	Tsogo Sun Group Medical Scheme	3,081	3,401	6,482	-	60,683	252	1.4	60,430	60,683	48,174	48,174	-	12,509	2,790	25.1	7,320	2,400	100.7	48,174	4.9	4.9	13.3	48,174	74.7
1434	Umed	8,016	10,567	18,583	7,911	152,917	7,186	9.7	35,731	160,828	133,793	133,793	-	27,035	20,285	29.5	-	6,750	98.9	133,793	5.9	5.7	7.0	125,882	46.6
1597	Umvuzo Health Medical Scheme	16,808	14,776	31,584	-	55,407	13,840	29.9	40,318	55,407	24,553	24,553	-	30,855	19,760	52.0	1,359	9,736	102.9	24,553	1.8	1.8	3.5	24,553	14.5
1520	University of Kwa-Zulu Natal Medical Scheme	3,331	3,857	7,188	37,307	70,805	419	1.9	70,054	108,112	76,781	62,579	-	31,331	3,733	22.9	26,148	1,450	100.7	76,781	3.5	2.3	11.1	62,579	77.1
1282	University of the Witwatersrand Staff Medical Aid Scheme	3,031	3,309	6,340	34,670	30,878	461	1.8	30,418	65,549	59,381	55,583	-	6,168	568	2.2	-	5,600	108.0	59,381	10.6	5.0	3.9	55,583	58.1
1291	Witbank Coalfields Medical Aid Scheme	10,460	15,545	26,005	153,876	259,602	709	1.0	169,590	413,478	326,883	282,372	-	86,595	10,218	20.9	67,377	9,000	84.2	326,883	4.8	3.0	13.3	282,372	106.7
1293	Wooltru Healthcare Fund	8,876	9,387	18,263	125,631	27,909	2,406	5.3	16,402	153,540	145,908	129,399	-	7,632	457	1.0	-	7,175	94.5	145,908	20.1	3.7	1.9	142,722	85.8
1253	Xstrata Medical Aid Scheme	7,838	15,300	23,138	47,969	16,038	2,083	5.1	13,955	64,008	55,159	53,913	-	8,849	1,349	3.3	-	7,500	104.1	55,159	7.2	1.8	1.1	53,913	35.9
<b>Sub-total: registered restricted schemes</b>		1,343,640	1,909,531	3,253,171	5,209,751	13,313,408	644,199	7.7	8,870,621	18,523,159	13,931,115	12,949,616	824,952	3,767,092	1,002,242	13.4	1,471,189	1,293,661	99.2	13,931,115	4.0	3.5	5.3	12,962,977	42.5
<b>Total registered schemes</b>		<b>3,488,009</b>	<b>4,580,496</b>	<b>8,068,505</b>	<b>10,071,591</b>	<b>30,529,876</b>	<b>2,637,363</b>	<b>11.3</b>	<b>16,478,695</b>	<b>40,601,467</b>	<b>29,441,584</b>	<b>27,947,477</b>	<b>886,639</b>	<b>10,273,244</b>	<b>2,861,731</b>	<b>15.2</b>	<b>4,254,243</b>	<b>3,157,270</b>	<b>99.5</b>	<b>29,441,584</b>	<b>3.6</b>	<b>3.0</b>	<b>4.4</b>	<b>27,880,347</b>	<b>32.9</b>



**Annexure L:** Balance sheet details: registered schemes as at 31 December 2009

**Notes**

- a An encumbered asset was excluded in the calculation of the solvency ratio.
- b The scheme was registered in 2005 and a phase-in solvency ratio of 22.0% applies.
- c The scheme was registered in 2006 and a phase-in solvency ratio of 17.5% applies.
- d The scheme was registered in 2007 and a phase-in solvency ratio of 13.5% applies.
- e The scheme was registered in 2008 and a phase-in solvency ratio of 13.5% applies.
- f The scheme was registered in 2009 and a phase-in solvency ratio of 10.0% applies.
- g Government Employees Medical Scheme (GEMS) was registered on 1 January 2005 but only started operations with effect from 1 January 2006.
- h Solvita Medical Scheme was registered with effect from 1 January 2008. The scheme was subsequently liquidated on 16 January 2009.
- i Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- j Stocksmmed was liquidated with effect from 31 December 2009.

In respect of trade and other receivables outstanding days, the denominator is gross contributions.

In respect of trade and other payables outstanding days, the denominator is net relevant healthcare expenditure incurred.

Prior year claims provision utilised = prior year payments / provision at the beginning of the year

Gross relevant healthcare expenditure cash coverage = short-term investments / gross healthcare expenditure incurred

In respect of the prior year claims provision utilised results:

- If it is above 100%, the scheme under-provided in the prior year.
- If it is below 100%, the scheme over-provided in the prior year.
- If it equals zero, no information was submitted.

- The scheme liquidated in 2009. Figures were submitted.
- Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- Stocksmmed was liquidated with effect from 31 December 2009.

- The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.



## Annexure M: Detailed financial information: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29)			Solvency ratio			
Ref no.	Name of medical scheme	Average 2009	Average 2008	% growth	Average 2009	Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 %	2008 %	
Registered schemes: open																																					
I522	Bestmed Medical Scheme	39,320	35,808	9.8	88,758	85,833	3.4	1,038,682	891,094	16.6	856,842	723,715	18.4	885,295	752,485	17.6	720,949	609,131	18.4	170,040	139,981	21.5	170,040	139,981	21.5	(34,148)	(25,397)	-34.5	17,742	43,519	-59.2	450,314	432,472	4.1	43.4	48.5	
I512	Bonitas Medical Fund	274,327	250,270	9.6	641,674	595,361	7.8	6,193,402	5,143,355	20.4	6,086,595	5,086,928	19.7	5,742,578	4,634,686	23.9	5,649,029	4,584,627	23.2	889,000	720,575	23.4	889,000	720,575	23.4	(451,435)	(218,274)	-106.8	(242,276)	72,858	-432.5	2,212,678	2,433,440	-9.1	35.7	47.3	
I034	Cape Medical Plan	6,903	7,176	-3.8	15,378	16,002	-3.9	121,796	114,903	6.0	102,815	97,023	6.0	119,839	108,733	10.2	101,036	91,077	10.9	16,631	16,709	-0.5	16,631	16,709	-0.5	(14,852)	(10,764)	-38.0	666	20,774	-96.8	158,113	157,172	0.6	129.8	136.8	
I552	Community Medical Aid Scheme (COMMED)	14,075	11,492	22.5	34,235	29,661	15.4	376,585	270,959	39.0	376,585	270,959	39.0	346,150	242,120	43.0	346,150	242,120	43.0	70,001	61,660	13.5	70,001	61,660	13.5	(39,566)	(32,821)	-20.5	(22,108)	(17,840)	-23.9	74,005	96,112	-23.0	19.7	35.5	
I491	Compare Wellness Medical Scheme	13,835	14,797	-6.5	31,844	34,484	-7.7	437,415	409,998	6.7	404,789	395,072	2.5	449,641	395,805	13.6	422,633	384,659	9.9	68,907	80,021	-13.9	68,907	80,021	-13.9	(86,751)	(69,608)	-24.6	(38,570)	(41,379)	6.8	122,105	162,248	-24.7	27.9	39.6	
I125	Discovery Health Medical Scheme	893,411	850,636	5.0	1,996,866	1,928,108	3.6	23,840,326	20,796,701	14.6	19,053,756	16,630,726	14.6	19,847,609	16,960,691	17.0	15,260,180	13,005,247	17.3	3,698,727	3,332,399	11.0	3,698,727	3,332,399	11.0	94,849	293,080	-67.6	790,832	997,490	-20.7	6,068,052	5,279,848	14.9	25.5	25.4	
I202	Fedhealth Medical Scheme	86,797	81,670	6.3	189,259	185,213	2.2	2,257,014	1,931,393	16.9	2,091,724	1,772,287	18.0	2,065,977	1,684,566	22.6	1,886,812	1,514,166	24.6	324,542	294,838	10.1	324,542	294,838	10.1	(119,631)	(36,717)	-225.8	37,464	76,498	-51.0	581,206	543,742	6.9	25.8	28.2	
I554	Genesis Medical Scheme	7,305	7,861	-7.1	21,263	23,168	-8.2	163,014	161,462	1.0	147,051	145,261	1.2	128,643	127,433	0.9	113,420	112,020	1.2	21,866	21,914	-0.2	21,866	21,914	-0.2	11,765	11,328	3.9	27,500	29,790	-7.7	173,044	145,545	18.9	106.2	90.1	
I561	Gen-Health Medical Scheme	11,692	10,579	10.5	28,345	25,780	10.0	244,634	192,556	27.0	230,628	179,479	28.5	257,864	189,336	36.2	245,919	179,552	37.0	40,317	37,807	6.6	40,317	37,807	6.6	(55,609)	(37,880)	-46.8	(42,274)	(11,824)	-257.5	52,508	94,782	-44.6	21.5	49.2	
I466	Good Hope Medical Aid Society	3,395	3,406	-0.3	8,769	9,527	-8.0	39,962	37,591	6.3	39,962	37,591	6.3	36,964	34,342	7.6	36,964	34,342	7.6	5,350	5,181	3.3	5,350	5,181	3.3	(2,351)	(1,932)	-21.7	1,141	3,000	-62.0	44,032	41,286	6.7	110.2	109.8	
I537	Hosmed Medical Aid Scheme	30,633	30,466	0.5	91,854	99,856	-8.0	836,451	788,145	6.1	836,451	788,145	6.1	679,031	639,782	6.1	679,031	639,782	6.1	153,068	162,808	-6.0	153,068	162,808	-6.0	4,351	(14,445)	130.1	15,835	(17,924)	188.3	103,498	87,663	18.1	12.4	11.1	
I556	Humanity Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
I577	Ingwe Health Plan	17,217	18,779	-8.3	24,841	29,928	-17.0	154,780	173,636	-10.9	154,780	173,636	-10.9	122,568	144,078	-14.9	122,568	144,078	-14.9	34,112	41,266	-17.3	34,112	41,266	-17.3	(1,900)	(11,708)	83.8	2,125	(5,446)	139.0	18,622	16,497	12.9	12.0	9.5	
I087	Keyhealth	45,718	52,920	-13.6	105,817	125,652	-15.8	1,516,489	1,544,299	-1.8	1,458,731	1,504,106	-3.0	1,416,933	1,368,224	3.6	1,364,112	1,324,710	3.0	199,326	195,831	1.8	199,326	195,831	1.8	(104,707)	(16,435)	-537.1	(51,835)	11,204	-562.6	222,905	276,858	-19.5	14.7	17.9	
I576	Liberty Health Medical Scheme	44,531	46,928	-5.1	94,969	100,949	-5.9	1,073,064	1,048,093	2.4	981,249	953,650	2.9	972,720	876,442	11.0	886,677	777,530	14.0	160,800	161,485	-0.4	160,800	161,485	-0.4	(66,229)	14,635	-552.5	(29,793)	48,259	-161.7	209,462	239,256	-12.5	19.5	22.8	
I549	Medicover	44,025	54,800	-19.7	109,630	141,079	-22.3	995,419	1,059,586	-6.1	872,146	884,465	-1.4	925,408	1,055,105	-12.3	784,750	864,600	-9.2	142,509	115,284	23.6	142,509	115,284	23.6	(55,113)	(95,419)	42.2	2,858	8,881	-67.8	389,657	391,424	-0.5	39.2	36.9	
I149	Medihelp	109,657	94,403	16.2	213,386	181,057	17.9	3,221,220	2,850,915	13.0	3,182,060	2,827,773	12.5	3,044,901	2,467,475	23.4	3,010,926	2,445,753	23.1	357,336	307,680	16.1	357,336	307,680	16.1	(186,201)	74,340	-350.5	(75,749)	191,633	-139.5	1,013,750	1,021,816	-0.8	31.5	35.8	
I506	Medimed Medical Scheme	4,396	4,768	-7.8	11,544	12,602	-8.4	91,593	89,501	2.3	79,039	78,439	0.8	79,312	76,052	4.3	68,171	65,732	3.7	6,827	9,234	-26.1	6,827	9,234	-26.1	4,040	3,473	16.3	12,056	12,618	-4.5	91,193	79,137	15.2	99.6	88.4	
I140	Medshield Medical Scheme	73,529	68,606	7.2	175,578	168,927	3.9	1,493,498	1,312,172	13.8	1,493,498	1,312,182	13.8	1,375,418	1,130,371	21.7	1,375,418	1,130,371	21.7	255,699	272,604	-6.2	255,699	272,604	-6.2	(137,619)	(90,794)	-51.6	(22,419)	(13,156)	-70.4	776,817	799,236	-2.8	52.0	60.9	
I167	Momentum Health	80,303	77,489	3.6	177,765	172,990	2.8	1,895,927	1,637,123	15.8	1,664,588	1,433,937	16.1	1,682,175	1,422,754	18.2	1,440,578	1,206,185	19.4	295,298	274,271	7.7	295,298	274,271	7.7	(71,288)	(46,519)	-53.2	(8,708)	2,401	-462.7	299,157	305,863	-2.2	15.8	18.7	
I166	National Independent Medical Aid Society (NIMAS)	14,534	17,205	-15.5	31,547	39,312	-19.8	343,395	343,667	-0.1	315,229	304,659	3.5	316,180	337,634	-6.4	286,885	300,162	-4.4	39,036	42,278	-7.7	39,036	42,278	-7.7	(10,692)	(37,780)	71.7	(1,522)	(29,458)	94.8	44,602	45,045	-1.0	13.0	13.1	
I560	Openplan Medical Scheme	-	8,917	-100.0	-	18,194	-100.0	-	225,847	-100.0	-	210,090	-100.0	-	214,934	-100.0	-	198,389	-100.0	-	28,589	-100.0	-	28,589	-100.0	-	(16,888)	100.0	-	(5,524)	100.0	-	82,131	-100.0	-	36.4	-
I215	Oxygen Medical Scheme	63,518	74,687	-15.0	146,026	173,765	-16.0	1,525,723	1,567,064	-2.6	1,445,593	1,490,647	-3.0	1,399,900	1,402,670	-0.2	1,315,884	1,324,707	-0.7	247,025	226,727	9.0	247,025	226,727	9.0	(117,316)	(60,787)	-93.0	(88,400)	(185,330)	-377.1	171,544	259,944	-34.0	11.2	16.6	
I587	Pathfinder Medical Scheme	-	1,627	-100.0	-	3,087	-100.0	-	22,382	-100.0	-	22,426	-100.0	-	23,544	-100.0	-	23,383	-100.0	-	5,597	-100.0	-	5,597	-100.0	-	(6,554)	100.0	-	(6,525)	100.0	-	(7,337)	100.0	-	-	-32.8
I546	Pharos Medical Plan	7,381	7,712	-4.3	17,192	17,954	-4.2	209,181	196,607	6.4	205,198	193,779	5.9	165,807	150,614	10.1	161,674	147,151	9.9	37,258	35,702	4.4	37,258	35,702	4.4	6,267	10,926	-42.6	10,896	15,682	-30.5	44,434	33,538	32.5	21.2	17.1	
I454	Pro Sano Medical Scheme	31,237	31,051	0.6	70,842	73,269	-3.3	783,496	724,066	8.2	659,653	592,235	11.4	792,085	682,039	16.1	669,568	568,291	17.8	98,450	91,585	7.5	98,450	91,585	7.5	(108,365)	(67,641)	-60.2	(48,789)	(28,948)	-68.5	219,767	264,244	-16.8	28.1	36.5	
I196	Protea Medical Aid Society	5,749	3,733	54.0	6,771	4,786	41.5	48,261	39,810	21.2	48,261	39,810	21.2	49,906	37,038	34.7	49,906	37,038	34.7	9,731	6,962	39.8	9,731	6,962	39.8	(11,376)	(4,900)	-171.5	(8,905)	(1,059)	-740.6	9,146	18,153	-49.6	19.0	45	

## Annexure M: Detailed financial information: registered schemes for the years ended 31 December 2008-2009

		Members			Beneficiaries			Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29)			Solvency ratio			
Ref no.	Name of medical scheme	Average 2009	Average 2008	% growth	Average 2009	Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 %	2008 %		
Registered schemes: open continued																																						
1586	Renaissance Health Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
1575	Resolution Health Medical Scheme	36,152	41,215	-12.3	80,397	93,011	-13.6	617,459	638,734	-3.3	602,357	619,651	-2.8	478,055	475,150	0.6	464,449	460,522	0.9	157,661	167,883	-6.1	(19,753)	(8,753)	-125.7	(4,165)	10,185	-140.9	98,599	102,764	-4.1	16.0	16.1					
1446	Selfmed Medical Scheme	11,698	12,490	-6.3	24,892	27,413	-9.2	291,256	278,770	4.5	291,256	278,770	4.5	262,361	265,583	-1.2	262,361	265,583	-1.2	43,344	41,562	4.3	43,344	41,562	4.3	(14,448)	(28,375)	49.1	3,783	(8,052)	147.0	125,622	124,440	0.9	43.1	44.6		
1486	Sizwe Medical Fund	63,107	64,250	-1.8	160,316	164,661	-2.6	1,574,519	1,460,728	7.8	1,574,519	1,460,728	7.8	1,417,186	1,271,830	11.4	1,417,186	1,271,830	11.4	222,524	221,505	0.5	222,524	221,505	0.5	(65,191)	(32,607)	-99.9	(4,418)	81,189	-105.4	602,482	596,211	1.1	38.3	40.8		
1141	Spectramed	55,527	69,181	-19.7	124,535	162,469	-23.3	1,454,014	1,555,929	-6.6	1,454,014	1,555,929	-6.6	1,282,233	1,348,435	-4.9	1,282,233	1,348,107	-4.9	189,679	223,132	-15.0	189,679	223,132	-15.0	(17,898)	(15,310)	-16.9	4,225	9,659	-56.3	247,133	234,907	5.2	17.0	15.1		
1464	Suremed Health	1,571	1,469	6.9	3,743	3,508	6.7	40,693	36,697	10.9	37,999	34,847	9.0	34,290	27,969	22.6	33,124	27,544	20.3	6,873	6,232	10.3	6,873	6,232	10.3	(1,998)	1,071	-286.6	3,182	6,183	-48.5	31,027	27,845	11.4	76.3	75.9		
1147	Telemed	25,496	28,143	-9.4	54,198	60,848	-10.9	959,102	918,897	4.4	940,511	900,241	4.5	838,519	837,293	0.1	816,053	820,245	-0.5	98,739	87,621	12.7	98,739	87,621	12.7	25,718	(7,624)	437.3	46,245	7,348	529.4	129,805	83,559	55.3	13.5	9.1		
1592	Thebemed	4,453	6,631	-32.8	14,845	21,595	-31.3	84,487	105,350	-19.8	84,487	105,350	-19.8	68,788	83,885	-18.0	68,788	83,885	-18.0	15,468	17,723	-12.7	15,468	17,723	-12.7	231	3,741	-93.8	1,426	4,731	-69.9	12,086	10,660	13.4	14.3	10.1		
1422	Topmed Medical Scheme	12,504	12,096	3.4	26,717	26,301	1.6	296,631	272,168	9.0	275,007	250,364	9.8	267,908	253,800	5.6	244,698	229,355	6.7	47,554	44,592	6.6	47,554	44,592	6.6	(17,245)	(23,584)	26.9	(4,994)	(1,759)	-183.9	109,738	112,390	-2.4	37.0	41.3		
Sub-total: registered open schemes		2,137,300	2,107,801	1.4	4,830,636	4,866,209	-0.7	54,354,174	49,003,457	10.9	48,175,191	43,510,003	10.7	47,674,769	41,858,749	13.9	41,704,540	36,591,543	14.0	8,138,166	7,518,197	8.2	8,138,166	7,518,197	8.2	(1,667,515)	(599,736)	-178.0	282,363	1,455,936	-80.6	14,917,370	14,603,846	2.1	27.4	29.8		
Registered schemes: restricted																																						
1005	AECI Medical Aid Society	7,383	7,462	-1.1	15,661	16,139	-3.0	233,200	210,690	10.7	233,200	210,690	10.7	225,602	206,654	9.2	225,602	206,654	9.2	21,159	20,547	3.0	21,159	20,547	3.0	(13,560)	(16,511)	17.9	632	(1,622)	139.0	157,922	149,126	5.9	67.7	70.8		
1487	Afrim SA Medical Scheme	1,209	1,366	-11.5	2,612	3,064	-14.8	38,905	42,507	-8.5	31,495	34,425	-8.5	39,353	42,817	-8.1	31,752	35,407	-10.3	4,758	3,650	30.4	4,758	3,650	30.4	(5,015)	(4,632)	-8.3	(2,678)	(1,217)	-120.1	17,974	20,652	-13.0	46.2	48.6		
1567	Afrox Medical Aid Society	3,436	3,266	5.2	7,938	7,731	2.7	81,410	70,215	15.9	81,410	70,215	15.9	78,618	66,563	18.1	78,618	66,563	18.1	8,348	7,008	19.1	8,348	7,008	19.1	(5,557)	(3,355)	-65.6	24,498	6,622	269.9	114,879	90,381	27.1	141.1	128.7		
1456	Alliance Midmed Medical Scheme	1,892	1,995	-5.2	4,883	5,033	-3.0	54,818	53,103	3.2	49,270	47,807	3.1	51,385	45,294	13.4	46,718	41,118	13.6	5,817	5,577	4.3	5,817	5,577	4.3	(3,265)	1,112	-393.5	2,060	5,639	-63.5	48,016	45,956	4.5	87.6	86.5		
1534	Altron Medical Aid Scheme	4,487	5,275	-14.9	10,039	11,774	-14.7	132,016	139,835	-5.6	105,606	111,824	-5.6	135,194	125,841	7.4	109,863	99,803	10.1	14,287	15,863	-9.9	14,287	15,863	-9.9	(18,544)	(3,842)	-382.6	(12,185)	3,653	-433.6	38,904	49,800	-21.9	29.5	35.6		
1012	Anglo Medical Scheme	11,837	12,570	-5.8	27,242	29,842	-8.7	396,055	378,558	4.6	335,976	318,810	5.4	399,139	377,599	5.7	341,348	323,242	5.6	30,329	28,906	4.9	30,329	28,906	4.9	(35,701)	(33,338)	-7.1	256,296	(43,782)	685.4	1,815,927	1,701,307	6.7	458.5	449.4		
1571	Anglovaal Group Medical Scheme	4,280	4,195	2.0	8,804	8,691	1.3	124,106	107,743	15.2	93,107	80,905	15.1	115,632	103,200	12.0	86,428	78,302	10.4	13,723	12,141	13.0	13,723	12,141	13.0	(7,043)	(9,538)	26.2	701	(5,184)	113.5	105,620	104,920	0.7	85.1	97.4		
1279	Bankmed	101,113	103,038	-1.9	200,012	201,508	-0.7	2,446,403	2,265,426	8.0	2,092,235	1,903,589	9.9	2,242,752	2,032,750	10.3	1,895,608	1,717,772	10.4	252,696	223,254	13.2	252,696	223,254	13.2	(56,068)	(37,438)	-49.8	56,116	104,739	-46.4	1,249,925	1,193,341	4.7	51.1	52.7		
1507	Barloworld Medical Scheme	5,969	5,823	2.5	12,696	12,465	1.8	210,280	186,049	13.0	202,165	186,049	13.0	202,165	171,169	18.1	202,165	171,169	18.1	16,176	14,145	14.4	16,176	14,145	14.4	(8,061)	735	-1,196.7	6,642	9,634	-31.1	115,464	108,825	6.1	54.9	58.5		
1557	BHP Billiton SA Medical Scheme	-	3,756	-100.0	-	8,144	-100.0	-	38,957	-100.0	-	38,957	-100.0	-	39,100	-100.0	-	39,100	-100.0	-	6,115	-100.0	-	6,115	-100.0	-	(6,259)	100.0	-	(21,209)	-100.0	-	-	-	-	-	-	
1115	Biz Health Medical Scheme	-	828	-100.0	-	1,348	-100.0	-	12,891	-100.0	-	12,439	-100.0	-	11,943	-100.0	-	11,565	-100.0	-	2,498	-100.0	-	2,498	-100.0	-	(1,625)	100.0	-	(1,107)	100.0	-	-	-	-	-	-	
1526	BMW Employees Medical Aid Society	2,247	2,349	-4.4	6,211	6,525	-4.8	66,666	63,751	4.6	65,999	60,563	9.0	76,976	72,702	5.9	69,333	72,006	-3.7	5,286	5,765	-8.3	5,286	5,765	-8.3	(8,620)	(17,208)	49.9	5,963	(13,204)	145.2	52,916	46,953	12.7	79.4	73.7		
1237	BP Medical Aid Society	2,409	2,475	-2.7	5,482	5,708	-4.0	61,496	56,866	8.1	61,496	56,866	8.1	73,268	64,060	14.4	73,268	64,060	14.4	5,303	4,640	14.3	5,303	4,640	14.3	(17,075)	(11,834)	-44.3	(45)	4,862	-100.9	53,937	51,821	4.1	87.7	91.1		
1590	Building & Construction Industry Medical Aid Fund	5,049	4,885	3.4	12,423	11,964	3.8	56,452	47,902	17.8	56,452	47,902	17.8	47,738	38,871	22.8	47,738	38,871	22.8	8,226	6,887	19.4	8,226	6,887	19.4	488	2,144	-77.3	4,415	5,849	-24.5	37,858	33,442	13.2	67.1	69.8		
1593	Built Environment Professional Associations Medical Scheme (BEPMED)	2,089	2,036	2.6	4,785	4,726	1.3	54,918	49,788	10.3	46,451	39,946	16.3	47,101	42,466	10.9	38,301	32,918	16.4	4,754	6,780	-29.9	4,754	6,780	-29.9	3,396	247	1,275.4	3,881	684	467.4	5,537	1,656	234.4	10.1	3.3		

## Annexure M: Detailed financial information: registered schemes for the years ended 31 December 2008-2009

		Members			Beneficiaries			Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29)			Solvency ratio			
Ref no.	Name of medical scheme	Average 2009	Average 2008	% growth	Average 2009	Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 %	2008 %		
Registered schemes: restricted continued																																						
1158	Cawmed Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	23,886	22,259	7.3	40,913	38,226	7.0	568,530	484,145	17.4	524,644	447,065	17.4	492,799	396,294	24.4	456,137	365,645	24.7	76,224	64,474	18.2	76,224	64,474	18.2	(7,716)	16,946	-145.5	12,790	38,161	-66.5	223,992	211,203	6.1	39.4	43.6		
1521	Clicks Group Medical Scheme	835	1,468	-43.1	1,706	3,055	-44.2	12,705	19,642	-35.3	12,705	19,642	-35.3	10,995	14,547	-24.4	10,990	14,532	-24.4	1,999	2,625	-23.8	1,999	2,625	-23.8	(284)	2,486	-111.4	442	3,398	-87.0	8,174	7,732	5.7	64.3	39.4		
1068	De Beers Benefit Society	7,391	8,237	-10.3	16,901	19,550	-13.5	223,640	209,545	6.7	223,640	209,545	6.7	225,984	212,279	6.5	225,984	212,279	6.5	17,868	15,755	13.4	17,868	15,755	13.4	(20,212)	(18,489)	-9.3	17,559	7,707	127.8	288,771	295,649	-2.3	129.1	141.1		
1484	Edcon Medical Aid Scheme	3,698	3,732	-0.9	7,391	7,417	-0.3	78,707	70,458	11.7	63,007	55,996	12.5	71,751	66,460	8.0	56,462	52,772	7.0	10,877	10,213	6.5	10,877	10,213	6.5	(4,332)	(6,989)	38.0	(2,090)	(3,633)	42.5	24,512	26,602	-7.9	31.1	37.8		
1572	Engen Medical Benefit Fund	3,495	3,363	3.9	8,169	8,010	2.0	115,706	101,543	13.9	98,350	86,312	13.9	107,442	90,627	18.6	91,956	77,172	19.2	8,264	7,100	16.4	8,264	7,100	16.4	(1,870)	2,040	-191.7	4,045	7,047	-42.6	63,676	59,622	6.8	55.0	58.7		
1585	Eyethumed Medical Scheme	3,449	3,888	-11.3	7,008	8,102	-13.5	33,755	35,026	-3.6	33,755	35,026	-3.6	33,968	33,186	2.4	33,968	33,186	2.4	7,191	7,210	-0.3	7,191	7,210	-0.3	(7,404)	(5,370)	-37.9	(3,867)	(1,443)	-168.0	22,134	26,001	-14.9	65.6	74.2		
1271	Fishing Industry Medical Scheme (Fishmed)	866	970	-10.7	2,214	2,428	-8.8	4,178	3,962	5.5	4,178	3,962	5.5	3,331	2,755	20.9	3,331	2,755	20.9	1,123	1,208	-7.1	1,123	1,208	-7.1	(276)	(1)	-21,700	263	642	-59.1	6,470	6,207	4.2	154.8	156.7		
1086	Food Workers Medical Benefit Fund	13,739	14,086	-2.5	19,030	19,931	-4.5	15,976	14,053	13.7	15,976	14,053	13.7	9,265	8,277	11.9	9,265	8,277	11.9	3,363	2,885	16.6	3,363	2,885	16.6	3,348	2,891	15.8	5,791	4,988	16.1	56,414	50,623	11.4	353.1	360.2		
1578	Foschini Group Medical Aid Scheme	2,517	2,292	9.8	5,179	4,711	9.9	50,226	42,911	17.0	50,226	42,911	17.0	52,904	41,763	26.7	52,904	41,763	26.7	5,011	4,295	16.7	5,011	4,295	16.7	(7,688)	(3,148)	-144.2	(4,256)	1,169	-464.1	33,407	37,664	-11.3	66.5	87.8		
1568	Gold Fields Medical Scheme	8,416	7,724	9.0	18,840	17,438	8.0	165,107	134,270	23.0	165,107	134,270	23.0	154,214	125,166	23.2	154,214	125,166	23.2	22,154	19,010	16.5	22,154	19,010	16.5	(11,261)	(9,906)	-13.7	(1,000)	1,021	-197.9	117,446	118,446	-0.8	71.1	88.2		
1270	Golden Arrow Employees Medical Benefit Fund	2,740	2,546	7.6	6,623	6,321	4.8	19,550	16,370	19.4	19,550	16,370	19.4	31,492	27,024	16.5	31,492	27,024	16.5	4,716	3,907	20.7	4,716	3,907	20.7	(16,658)	(14,561)	-14.4	149	(151)	199.2	19,517	19,368	0.8	99.8	118.3		
1598	Government Employees Medical Scheme (GEMS)	357,596	253,525	41.0	991,872	692,820	43.2	8,898,964	5,599,265	58.9	8,719,807	5,471,781	59.4	8,094,085	4,789,436	69.0	7,946,098	4,686,056	69.6	592,841	340,115	74.3	592,841	340,115	74.3	180,868	445,610	-59.4	263,290	508,544	-48.2	986,269	722,980	36.4	11.1	12.9		
1523	Grinsek Electronics Medical Aid Scheme	1,130	1,145	-1.3	2,787	2,861	-2.6	28,624	27,269	5.0	28,624	27,269	5.0	30,919	28,696	7.7	30,837	28,574	7.9	3,544	3,401	4.2	3,544	3,401	4.2	(5,756)	(4,706)	-22.3	(3,055)	(963)	-217.2	26,141	29,195	-10.5	91.3	107.1		
1111	IBM (SA) Medical Scheme	2,239	2,163	3.5	5,106	4,996	2.2	56,989	49,891	14.2	46,520	39,963	16.4	54,897	41,935	30.9	44,150	32,122	37.4	6,934	6,174	12.3	6,934	6,174	12.3	(4,564)	1,667	-373.8	(2,937)	3,833	-176.6	15,402	18,340	-16.0	27.0	36.8		
1591	Impala Medical Plan	7,707	6,891	11.8	16,513	15,230	8.4	51,648	43,760	18.0	51,648	43,760	18.0	46,743	40,973	14.1	46,743	40,973	14.1	650	600	8.4	650	600	8.4	4,255	2,187	94.5	4,322	2,147	101.3	14,632	10,309	41.9	28.3	23.6		
1559	Imperial Group Medical Scheme	5,962	6,179	-3.5	14,226	14,968	-5.0	157,483	149,903	5.1	157,483	149,903	5.1	149,273	134,586	10.9	149,021	134,144	11.1	17,764	17,228	3.1	17,764	17,228	3.1	(9,302)	(1,469)	-533.2	(9,212)	6,291	-246.4	152,478	160,650	-5.1	96.8	107.2		
1145	LA-Health Medical Scheme	23,472	21,625	8.5	50,054	44,674	12.0	710,059	609,373	16.5	588,527	524,193	12.3	624,591	533,868	17.0	506,834	447,896	13.2	89,104	75,722	17.7	89,104	75,722	17.7	(7,412)	575	-1,388.0	19,503	33,408	-41.6	238,002	218,921	8.7	33.5	35.9		
1197	Libcare Medical Scheme	5,633	5,380	4.7	12,785	12,268	4.2	170,493	138,755	22.9	136,503	107,091	27.5	154,375	129,522	19.2	124,171	103,471	20.0	17,276	14,839	16.4	17,276	14,839	16.4	(4,944)	(11,220)	55.9	8,025	(11,389)	170.5	131,400	123,375	6.5	77.1	88.9		
1599	Lonmin Medical Scheme	13,710	12,852	6.7	14,538	13	9.2	70,764	59,136	19.7	70,764	59,136	19.7	56,730	46,195	22.8	56,730	46,195	22.8	13,356	12,626	5.8	13,356	12,626	5.8	678	315	115.1	3,911	3,806	2.8	13,431	9,520	41.1	19.0	16.1		
1547	Malcor Medical Scheme	4,469	4,223	5.8	10,181	9,738	4.6	128,416	112,676	14.0	126,684	111,194	13.9	132,096	117,115	12.8	130,705	115,990	12.7	15,661	14,683	6.7	15,661	14,683	6.7	(19,682)	(19,479)	-1.0	3,320	78	4,144.8	35,161	31,841	10.4	27.4	28.3		
1042	Masscom Medical Scheme	-	732	-100.0	-	1,158	-100.0	-	22,711	-100.0	-	18,259	-100.0	-	28,829	-100.0	-	24,219	-100.0	-	2,154	-100.0	-	2,154	-100.0	-	(8,114)	1,000	-	(5,686)	1,000	-	6,118	-100.0	-	26.9	-	
1495	Massmart Health Plan	2,140	1,873	14.3	4,655	4,065	14.5	66,777	54,045	23.6	50,077	40,528	23.6	59,804	42,908	39.4	48,026	33,838	41.9	5,608	4,725	18.7	5,608	4,725	18.7	(3,557)	1,965	-281.0	1,957	7,588	-74.2	47,919	44,649	7.3	71.8	82.6		
1039	MBMed Medical Aid Fund	3,466	3,724	-6.9	9,139	9,778	-6.5	86,869	85,099	2.1	86,869	85,099	2.1	90,780	78,674	15.4	90,780	78,674	15.4	8,078	8,099	-0.3	8,078	8,099	-0.3	(11,989)	(16,674)	-61.62	(3,384)	4,366	-177.5	56,905	60,289	-5.6	65.5	70.8		
1588	MEDCOR	20,544	27,608	-25.6	54,138	76,203	-29.0	540,934	633,534	-14.6	540,934	633,534	-14.6	551,861	621,468	-11.2	551,861	621,468	-11.2	73,569	61,739	19.2	73,569	61,739	19.2	(84,496)	(49,673)	-70.1	(71,454)	(27,742)	-157.6	59,052	130,507	-54.8	10.9	20.6		
1548	Medipos Medical Scheme	10,733	10,267	4.5	23,239	22,559	3.0	280,334	240,544	16.5	215,990	185,557	16.4	268,285	226,841	18.3	210,239	179,742	17.0	27,362	23,124	18.3	27,362	23,124	18.3	(21,610)	(17,310)	-24.8	12,640	52,929	-76.1	257,352	250,207	2.9	91.8	104.0		
1535	Metrocare	1,552	1,671	-7.2	3,775	4,120	-8.4	52,669	51,711	1.9	52,669	51,711	1.9	54,758	47,645	14.9	54,758	47,645	14.9	4,113	4,146	-0.8	4,113	4,146	-0.8	(6,202)	(80)	-7,699.0	2,556	7,081	-63.9	93,099	90,543	2.8	176.8	175.1		

## Annexure M: Detailed financial information: registered schemes for the years ended 31 December 2008-2009

Ref no.	Name of medical scheme	Members			Beneficiaries			Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29)			Solvency ratio	
		Average	Average	%	Average	Average	%	2009	2008	%	2009	2008	%	2009	2008	%	2009	2008	%	2009	2008	%	2009	2008	%	2009	2008	%	2009	2008	%	2009	2008	%	2009	2008
		2009	2008	growth	2009	2008	growth	R'000	R'000	growth	R'000	R'000	growth	R'000	R'000	growth	R'000	R'000	growth	R'000	R'000	growth	R'000	R'000	growth	R'000	R'000	growth	R'000	R'000	growth	R'000	R'000	growth	%	%
Registered schemes: restricted continued																																				
I105	Metropolitan Medical Scheme	5,580	5,267	5.9	13,442	12,930	4.0	126,981	112,992	12.4	126,981	112,992	12.4	124,434	104,761	18.8	124,434	104,761	18.8	12,488	10,890	14.7	12,488	10,890	14.7	(9,941)	(2,658)	-273.9	1,839	8,587	-78.6	87,827	85,988	2.1	69.2	76.1
I569	Minemed Medical Scheme	6,730	6,417	4.9	14,959	14,529	3.0	174,487	141,134	23.6	174,487	141,134	23.6	168,462	148,101	13.7	168,462	148,101	13.7	13,518	13,752	-1.7	13,518	13,752	-1.7	(7,492)	(20,718)	63.8	(7,285)	(17,801)	59.1	20,030	27,315	-26.7	11.5	19.4
I566	Moremed Medical Scheme	1,408	1,420	-0.8	2,514	2,635	-4.6	12,067	10,500	14.9	11,823	10,267	15.2	11,067	10,328	7.2	10,871	10,161	7.0	3,692	3,444	7.2	3,692	3,444	7.2	(2,740)	(3,338)	17.9	(1,614)	(1,896)	14.9	7,890	9,504	-17.0	65.4	90.5
I600	Motohealth Care	42,907	54,641	-21.5	99,783	127,804	-21.9	859,269	821,090	4.6	859,269	821,090	4.6	762,348	791,349	-3.7	762,348	791,349	-3.7	104,240	120,123	-13.2	104,240	120,123	-13.2	(7,320)	(90,382)	91.9	15,377	(96,171)	116.0	330,789	315,413	4.9	38.5	38.4
I154	Nampak SA Medical Scheme	5,220	5,139	1.6	12,451	12,546	-0.8	158,213	143,441	10.3	145,348	131,423	10.6	156,081	129,926	20.1	143,185	117,121	22.3	14,301	12,911	10.8	14,301	12,911	10.8	(12,139)	1,391	-972.7	8,181	12,597	-35.1	102,382	106,773	-4.1	64.7	74.4
I241	Naspers Medical Fund	6,630	6,805	-2.6	13,187	13,403	-1.6	153,821	145,977	5.4	126,283	117,057	7.9	163,703	145,918	12.2	137,560	120,452	14.2	16,272	14,901	9.2	16,272	14,901	9.2	(27,549)	(18,297)	-50.6	(12,303)	(12,594)	2.3	79,286	93,305	-15.0	51.5	63.9
I469	Nedgroup Medical Aid Scheme	25,047	25,064	-0.1	48,932	49,451	-1.1	509,512	457,711	11.3	477,571	428,958	11.3	497,597	442,451	12.5	468,070	417,345	12.2	58,880	52,131	12.9	58,880	52,131	12.9	(49,380)	(40,518)	-21.9	37,091	16,508	124.7	229,986	217,870	5.6	45.1	47.6
I584	Nettecare Medical Scheme	15,279	14,429	5.9	35,414	33,275	6.4	424,296	376,669	12.6	361,910	320,248	13.0	385,043	322,778	19.3	327,904	272,428	20.4	32,377	32,604	-0.7	32,377	32,604	-0.7	1,630	15,217	-89.3	26,952	37,038	-27.2	229,252	207,898	10.3	54.0	55.2
I124	Old Mutual Staff Medical Aid Fund	14,564	14,457	0.7	30,632	31,164	-1.7	303,486	268,458	13.0	292,241	259,322	12.7	288,140	271,716	6.0	275,577	260,049	6.0	35,241	31,143	13.2	35,241	31,143	13.2	(18,576)	(31,870)	41.7	(4,303)	(18,668)	77.0	124,544	128,847	-3.3	41.0	48.0
I441	Parmed Medical Aid Scheme	2,220	2,078	6.8	5,433	5,276	3.0	134,761	112,538	19.7	134,761	112,538	19.7	119,029	101,491	17.3	119,029	101,491	17.3	7,241	5,610	29.1	7,241	5,610	29.1	8,491	5,437	56.2	16,312	13,543	20.4	88,533	72,221	22.6	65.7	64.2
I515	PG Beon Medical Aid Society	656	765	-14.2	1,412	1,704	-17.1	20,173	22,884	-11.8	20,173	22,884	-11.8	17,903	17,844	0.3	17,903	17,844	0.3	2,105	2,402	-12.4	2,105	2,402	-12.4	165	2,638	-93.8	2,379	5,107	-53.4	27,479	25,100	9.5	136.2	109.7
I186	PG Group Medical Scheme	1,267	1,259	0.7	2,714	2,693	0.8	43,972	39,572	11.1	33,104	29,933	10.6	38,320	34,763	10.2	29,536	26,841	10.0	3,042	2,691	13.0	3,042	2,691	13.0	527	401	31.4	7,893	5,333	48.0	48,479	43,555	11.3	110.3	110.1
I563	Pick & Pay Medical Scheme	7,618	7,127	6.9	16,048	15,030	6.8	179,993	152,062	18.4	135,118	114,137	18.4	149,607	128,870	16.1	108,743	95,458	13.9	18,507	15,835	16.9	18,507	15,835	16.9	7,868	2,843	176.7	16,110	17,608	-8.5	145,960	129,850	12.4	81.1	85.4
I583	Platinum Health	31,479	30,554	3.0	54,800	51,929	5.5	324,783	281,385	15.4	324,770	281,385	15.4	365,396	282,047	29.6	365,391	282,047	29.5	27,627	18,350	50.6	27,627	18,350	50.6	(68,248)	(19,012)	-259.0	(27,324)	24,409	-211.9	104,013	133,450	-22.1	32.0	47.4
I194	Profound	24,313	23,861	1.9	61,661	61,625	0.1	665,555	585,472	13.7	665,555	585,472	13.7	610,862	528,010	15.7	610,862	528,010	15.7	88,304	75,189	17.4	88,304	75,189	17.4	(33,611)	(17,727)	-89.6	(1,368)	4,046	-133.8	300,160	301,528	-0.5	45.1	51.5
I516	Quantum Medical Aid Society	6,968	7,139	-2.4	14,576	14,951	-2.5	123,161	113,456	8.6	102,644	92,096	11.5	117,002	111,916	4.5	95,665	90,812	5.3	18,124	16,926	7.1	18,124	16,926	7.1	(11,145)	(15,641)	28.7	(993)	2,577	-138.5	141,173	142,165	-0.7	114.6	125.3
I201	Rand Water Medical Scheme	2,883	2,816	2.4	7,174	6,948	3.2	89,389	80,844	10.6	89,389	80,844	10.6	91,304	79,514	14.8	91,304	79,514	14.8	5,913	5,002	18.2	5,913	5,002	18.2	(7,828)	(3,672)	-113.2	(36)	6,224	-100.6	85,684	85,720	-	95.9	106.0
I430	Remed Medical Aid Scheme	15,183	14,328	6.0	35,023	33,152	5.6	450,730	387,892	16.2	409,903	338,068	21.2	407,345	350,007	16.4	372,251	311,436	19.5	32,941	27,628	19.2	32,941	27,628	19.2	4,711	(995)	573.3	20,994	19,815	5.9	221,697	197,156	12.4	49.2	50.8
I176	Retail Medical Scheme	6,668	5,531	20.5	12,644	10,897	16.0	112,329	97,935	14.7	100,526	86,386	16.4	91,639	73,537	24.6	80,027	62,387	28.3	16,351	12,856	27.2	16,351	12,856	27.2	4,148	11,144	-62.8	12,800	19,577	-34.6	110,647	97,846	13.1	98.5	99.9
I013	Rhodes University Medical Scheme	991	952	4.1	2,125	2,018	5.3	23,181	19,598	18.3	23,181	19,598	18.3	20,901	17,809	17.4	20,901	17,809	17.4	2,208	2,068	6.8	2,208	2,068	6.8	72	(279)	125.8	1,931	1,960	-1.5	21,571	19,640	9.8	93.1	100.2
I209	SA Breweries Medical Aid Society	9,307	8,835	5.3	21,352	20,467	4.3	226,778	197,717	14.7	208,122	181,541	14.6	202,177	167,922	20.4	187,128	155,309	20.5	22,624	19,761	14.5	22,624	19,761	14.5	(1,630)	6,471	-125.2	20,103	18,693	7.5	198,341	178,238	11.3	87.5	90.1
I424	SABC Medical Aid Scheme	4,644	4,429	4.8	10,062	9,659	4.2	151,779	134,173	13.1	129,002	114,041	13.1	140,856	116,498	20.9	125,515	103,647	21.1	10,575	8,403	25.9	10,575	8,403	25.9	(7,088)	1,991	-456.1	216	9,564	-97.7	77,085	76,869	0.3	50.8	57.3
I038	SAMWUMed	29,983	27,129	10.5	72,991	68,429	6.7	487,426	356,444	36.7	487,426	356,444	36.7	391,316	360,915	8.4	391,316	360,915	8.4	38,627	33,065	16.8	38,627	33,065	16.8	57,482	(37,536)	253.1	83,486	(11,906)	801.2	291,650	208,164	40.1	59.8	58.4
I527	Sappi Medical Aid Scheme	4,125	4,128	-0.1	9,584	9,702	-1.2	139,360	124,522	11.9	117,185	104,681	11.9	132,226	116,270	13.7	112,001	98,636	13.5	9,767	8,880	10.0	9,767	8,880	10.0	(4,583)	(2,835)	-61.7	2,625	5,331	-50.8	59,581	56,956	4.6	42.8	45.7
I234	Sasolmed	27,916	24,562	13.7	73,443	65,561	12.0	936,305	778,377	20.3	936,305	778,377	20.3	846,039	682,179	24.0	846,039	682,179	24.0	65,626	50,352	30.3	65,626	50,352	30.3	24,640	45,846	-46.3	63,798	86,518	-26.3	436,855	371,615	17.6	46.7	47.7
I531	Sedmed	871	858	1.5	2,035	2,042	-0.4	17,918	16,410	9.2	17,918	16,410	9.2	17,563	14,663	19.8	17,563	14,663	19.8	585	431	35.9	585	431	35.9	(230)	1,316	-117.5	1,657	3,024	-45.2	12,397	10,741	15.4	69.2	65.5
I243	Siemens Medical Scheme	2,985	2,991	-0.2	6,748	6,782	-0.5	96,678	90,785	6.5	72,539	68,130	6.5	91,731	84,193	9.																				

## Annexure M: Detailed financial information: registered schemes for the years ended 31 December 2008-2009

		Members			Beneficiaries			Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29)			Solvency ratio			
Ref no.	Name of medical scheme	Average 2009	Average 2008	% growth	Average 2009	Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 %	2008 %		
Registered schemes: restricted continued																																						
1254	Stockamed	892	917	-2.8	1,910	1,984	-3.7	27,687	25,400	9.0	20,766	19,050	9.0	28,390	24,949	13.8	22,977	20,156	14.0	2,682	2,581	3.9	2,682	2,581	3.9	(4,893)	(3,686)	-32.7	(2,018)	(128)	-1,478.9	25,594	27,611	-7.3	92.4	108.7		
1544	Tiger Brands Medical Scheme	5,014	5,061	-0.9	11,576	11,675	-0.9	155,517	137,212	13.3	155,517	137,212	13.3	151,806	143,857	5.5	151,806	143,857	5.5	11,622	10,393	11.8	11,622	10,393	11.8	(7,911)	(17,038)	53.6	1,356	(6,122)	122.1	80,270	78,915	1.7	51.6	57.5		
1582	Transmed Medical Fund	74,705	76,060	-1.8	146,985	152,147	-3.4	1,289,223	1,248,036	3.3	1,204,078	1,157,574	4.0	1,367,876	1,254,425	9.0	1,281,130	1,166,543	9.8	142,165	130,009	9.4	142,165	130,009	9.4	(219,217)	(138,978)	-57.7	(171,486)	(72,943)	-135.1	372,083	518,685	-28.3	28.9	41.6		
1579	Tsogo Sun Group Medical Scheme	2,940	2,781	5.7	6,243	5,926	5.3	64,522	56,292	14.6	49,542	42,854	15.6	54,430	47,462	14.7	40,588	35,300	15.0	8,624	7,563	14.0	8,624	7,563	14.0	329	(9)	3,686.7	4,795	5,172	-7.3	48,174	43,379	11.1	74.7	77.1		
1434	Umed	8,071	8,233	-2.0	18,843	19,644	-4.1	270,421	236,731	14.2	270,421	236,731	14.2	250,680	236,986	5.8	250,680	236,986	5.8	25,813	25,086	2.9	25,813	25,086	2.9	(6,072)	(25,340)	76.0	7,897	(7,809)	201.1	125,882	119,985	4.9	46.6	50.7		
1597	Umwuzo Health Medical Scheme	17,365	20,386	-14.8	32,209	35,180	-8.4	169,050	163,733	3.2	169,050	163,733	3.2	138,791	135,146	2.7	138,598	134,875	2.8	28,966	22,230	30.3	28,966	22,230	30.3	1,486	6,629	-77.6	4,327	9,762	-55.7	24,553	20,226	21.4	14.5	12.4		
1520	University of Kwa-Zulu Natal Medical Scheme	3,258	3,432	-5.1	7,022	7,364	-4.6	81,216	77,076	5.4	60,929	57,851	5.3	76,069	62,254	22.2	59,473	47,495	25.2	9,595	8,931	7.4	9,595	8,931	7.4	(8,139)	1,425	-671.3	172	10,545	-98.4	62,579	62,407	0.3	77.1	81.0		
1282	University of the Witwatersrand Staff Medical Aid Scheme	2,973	2,897	2.6	6,270	6,244	0.4	95,734	82,852	15.5	95,734	82,852	15.5	92,458	77,817	18.8	92,458	77,817	18.8	8,347	7,185	16.2	8,347	7,185	16.2	(5,071)	(2,150)	-135.9	(528)	6,400	-108.2	55,583	56,111	-0.9	58.1	67.7		
1291	Witbank Coalfields Medical Aid Scheme	10,308	9,152	12.6	25,817	23,208	11.2	264,630	225,647	17.3	200,895	169,683	18.4	233,590	200,884	16.3	178,342	153,485	16.2	12,788	10,889	17.4	12,788	10,889	17.4	9,765	5,309	83.9	35,561	32,168	10.5	282,372	246,811	14.4	106.7	109.4		
1293	Wooltru Healthcare Fund	8,829	8,745	1.0	18,153	18,170	-0.1	166,285	149,492	11.2	166,285	149,492	11.2	159,001	144,960	9.7	159,001	144,960	9.7	19,717	20,820	-5.3	19,717	20,820	-5.3	(12,433)	(16,288)	23.7	2,556	439	482.8	142,722	140,166	1.8	85.8	93.8		
1253	Xstrata Medical Aid Scheme	7,668	7,250	5.8	22,356	20,607	8.5	150,061	129,876	15.5	150,061	129,876	15.5	150,316	119,006	26.3	150,316	119,006	26.3	15,340	13,916	10.2	15,340	13,916	10.2	(15,595)	(3,046)	-411.9	(7,543)	3,344	-325.6	53,913	61,456	-12.3	35.9	47.3		
Sub-total: registered restricted schemes		1,297,145	1,199,010	8.2	3,115,571	2,843,488	9.6	30,509,043	25,102,103	21.5	28,956,492	23,673,323	22.3	28,633,583	23,020,955	24.4	27,198,658	21,770,188	24.9	2,678,079	2,216,057	20.8	2,678,079	2,216,057	20.8	(920,245)	(312,923)	-194.1	681,508	1,097,434	-37.9	12,962,977	12,482,552	3.8	42.5	49.7		
Total registered schemes		3,434,445	3,306,811	3.9	7,946,207	7,709,697	3.1	84,863,217	74,105,560	14.5	77,131,683	67,183,326	14.8	76,308,352	64,879,703	17.6	68,903,198	58,361,731	18.1	10,816,245	9,734,254	11.1	10,816,245	9,734,254	11.1	(2,587,760)	(912,659)	-183.5	963,871	2,553,370	-62.3	27,880,347	27,086,398	2.9	32.9	36.6		

### Notes

- An encumbered asset was excluded in the calculation of the solvency ratio.
- The scheme was registered in 2005 and a phase-in solvency ratio of 22.0% applies.
- The scheme was registered in 2006 and a phase-in solvency ratio of 17.5% applies.
- The scheme was registered in 2007 and a phase-in solvency ratio of 13.5% applies.
- The scheme was registered in 2008 and a phase-in solvency ratio of 13.5% applies.
- The scheme was registered in 2009 and a phase-in solvency ratio of 10.0% applies.
- Government Employees Medical Scheme (GEMS) was registered on 1 January 2005 but only started operations with effect from 1 January 2006.
- BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.
- Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009.
- Solvita Medical Scheme was registered with effect from 1 January 2008. The scheme was subsequently liquidated on 16 January 2009.
- Biz Health Medical Scheme was liquidated with effect from 30 April 2008.





Annexure M: Detailed financial information: registered schemes for the years ended 31 December 2008-2009

Notes (continued)

- l Cawmed Medical Scheme was liquidated with effect from 1 September 2008.
- m The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.
- n Mascom Medical Scheme was liquidated with effect from 31 December 2008.
- o Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.
- p Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.
- q Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- r Stocksmed was liquidated with effect from 31 December 2009.

Prior year figures have been restated.  
PMSA = Personal Medical Savings Account  
Net relevant healthcare expenditure incurred (incl. managed healthcare claims) includes risk transfer arrangements.

- The scheme liquidated in 2008. No figures were submitted at the time of finalising the Annual Report.
- Cawmed Medical Scheme was liquidated with effect from 1 September 2008.
- The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.
- Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.

- The schemes liquidated in 2008 and 2009. Figures were submitted.
- Biz Health Medical Scheme was liquidated with effect from 30 April 2008.
- Mascom Medical Scheme was liquidated with effect from 31 December 2008.
- Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- Stocksmed was liquidated with effect from 31 December 2009.

- The scheme was deregistered in 2008.
- Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.

- The following schemes amalgamated in 2008 and 2009:
  - Global Health amalgamated with Munimed with effect from 1 January 2008.
  - Cimas Wellness Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.
  - Lifemed Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.
  - Meridian Health amalgamated with Momentum Health with effect from 1 January 2008.
  - BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.
  - Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009.

- The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.

## Annexure N: Detailed financial ratios: registered schemes for the years ended 31 December 2008-2009

Ref no. Name of scheme		Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)					Net relevant healthcare expenditure incurred (incl. managed healthcare claims)					Gross non-healthcare expenses (incl. PMSA)					Net non-healthcare expenses					Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29 of the Medical Schemes Act 131 of 1998)			Solvency ratio		
		pabpm	pabpm	%	pabpm	pabpm	%	As % of	As % of	pabpm	pabpm	%	As % of	As % of	pabpm	pabpm	%	As % of	As % of	pabpm	pabpm	%	As % of	As % of	pabpm	pabpm	%	pabpm	pabpm	%	pabpm	pabpm	%	2009	2008				
		2009	2008	growth	2009	2008	growth	GCI	GCI	2009	2008	growth	RCI	RCI	2009	2008	growth	GCI	GCI	2009	2008	growth	RCI	RCI	2009	2008	growth	2009	2008	growth	2009	2008	growth	%	%				
Registered schemes: open																																							
1252	Bestmed Medical Scheme	975.2	865.1	12.7	804.5	702.6	14.5	85.2	84.4	831.2	730.6	13.8	84.1	84.2	676.9	591.4	14.5	16.4	15.7	159.6	135.9	17.4	19.8	19.3	159.6	135.9	17.4	-32.1	-24.7	-30.0	16.7	42.3	-60.5	5,073.5	5,038.5	0.7	43.4	48.5	
1512	Bonitas Medical Fund	804.3	719.9	11.7	790.5	712.0	11.0	92.7	90.1	745.8	648.7	15.0	92.8	90.1	733.6	641.7	14.3	14.4	14.0	115.5	100.9	14.5	14.6	14.2	115.5	100.9	14.5	-58.6	-30.6	-91.5	-31.5	10.2	-408.8	3,448.3	4,087.3	-15.6	35.7	47.3	
1034	Cape Medical Plan	660.0	598.4	10.3	557.1	505.3	10.3	98.4	94.6	649.4	566.2	14.7	98.3	93.9	547.5	474.3	15.4	13.7	14.5	90.1	87.0	3.6	16.2	17.2	90.1	87.0	3.6	-80.5	-56.1	-43.5	3.6	108.2	-96.7	10,281.7	9,821.8	4.7	129.8	136.8	
1552	Community Medical Aid Scheme (COMMED)	916.7	761.3	20.4	916.7	761.3	20.4	91.9	89.4	842.6	680.2	23.9	91.9	89.4	842.6	680.2	23.9	18.6	22.8	170.4	173.2	-1.6	18.6	22.8	170.4	173.2	-1.6	-96.3	-92.2	-4.4	-53.8	-50.1	-7.4	2,161.7	3,240.4	-33.3	19.7	35.5	
1491	Compare Wellness Medical Scheme	1,144.7	990.8	15.5	1,059.3	954.7	11.0	102.8	96.5	1,176.7	956.5	23.0	104.4	97.4	1,106.0	929.6	19.0	15.8	19.5	180.3	193.4	-6.8	17.0	20.3	180.3	193.4	-6.8	-227.0	-168.2	-35.0	-100.9	-100.0	-0.9	3,834.5	4,705.0	-18.5	27.9	39.6	
1125	Discovery Health Medical Scheme	994.9	898.8	10.7	795.2	718.8	10.6	83.3	81.6	828.3	733.0	13.0	80.1	78.2	636.8	562.1	13.3	15.5	16.0	154.4	144.0	7.2	19.4	20.0	154.4	144.0	7.2	4.0	12.7	-68.5	33.0	43.1	-23.4	3,038.8	2,738.4	11.0	25.5	25.4	
1202	Fedhealth Medical Scheme	993.8	869.0	14.4	921.0	797.4	15.5	91.5	87.2	909.7	757.9	20.0	90.2	85.4	830.8	681.3	21.9	14.4	15.3	142.9	132.7	7.7	15.5	16.6	142.9	132.7	7.7	-52.7	-16.5	-219.4	16.5	34.4	-52.0	3,071.0	2,935.8	4.6	25.8	28.2	
1554	Genesis Medical Scheme	638.9	580.8	10.0	576.3	522.5	10.3	78.9	78.9	504.2	458.4	10.0	77.1	77.1	444.5	402.9	10.3	13.4	13.6	85.7	78.8	8.8	14.9	15.1	85.7	78.8	8.8	46.1	40.7	13.3	107.8	107.2	0.6	8,138.3	6,282.2	29.5	106.2	90.1	
1561	Gen-Health Medical Scheme	719.2	622.4	15.6	678.0	580.2	16.9	105.4	98.3	758.1	612.0	23.9	106.6	100.0	723.0	580.4	24.6	16.5	19.6	118.5	122.2	-3.0	17.5	21.1	118.5	122.2	-3.0	-163.5	-122.4	-33.6	-124.3	-38.2	-225.4	1,852.5	3,676.6	-49.6	21.5	49.2	
1466	Good Hope Medical Aid Society	379.8	328.8	15.5	379.8	328.8	15.5	92.5	91.4	351.3	300.4	16.9	92.5	91.4	351.3	300.4	16.9	13.4	13.8	50.8	45.3	12.1	13.4	13.8	50.8	45.3	12.1	-22.3	-16.9	-32.0	10.8	26.2	-58.8	5,021.7	4,333.8	15.9	110.2	109.8	
1537	Hoarned Medical Aid Scheme	758.9	657.7	15.4	758.9	657.7	15.4	81.2	81.2	616.0	533.9	15.4	81.2	81.2	616.0	533.9	15.4	18.3	20.7	138.9	135.9	2.2	18.3	20.7	138.9	135.9	2.2	3.9	-12.1	132.2	14.4	-15.0	196.0	1,126.8	877.9	28.4	12.4	11.1	
1556	Humanity Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1577	Inge Health Plan	519.2	483.5	7.4	519.2	483.5	7.4	79.2	83.0	411.2	401.2	2.5	79.2	83.0	411.2	401.2	2.5	22.0	23.8	114.4	114.9	-0.4	22.0	23.8	114.4	114.9	-0.4	-6.4	-32.6	80.4	7.1	-15.2	146.7	749.7	551.2	36.0	12.0	9.5	
1087	Keyhealth	1,194.3	1,024.2	16.6	1,148.8	997.5	15.2	93.4	88.6	1,115.9	907.4	23.0	93.5	88.1	1,074.3	878.6	22.3	13.1	12.7	157.0	129.9	20.9	13.7	13.0	157.0	129.9	20.9	-82.5	-10.9	-656.9	-40.8	7.4	-651.4	2,106.5	2,203.4	-4.4	14.7	17.9	
1576	Liberty Health Medical Scheme	941.6	865.2	8.8	861.0	787.2	9.4	90.6	83.6	853.5	723.5	18.0	90.4	81.5	778.0	641.9	21.2	15.0	15.4	141.1	133.3	5.9	16.4	16.9	141.1	133.3	5.9	-58.1	12.1	-580.2	-26.1	39.8	-165.6	2,205.6	2,370.1	-6.9	19.5	22.8	
1549	Medicover	756.7	625.9	20.9	662.9	522.4	26.9	93.0	99.6	703.4	623.2	12.9	90.0	97.8	596.5	510.7	16.8	14.3	10.9	108.3	68.1	59.0	16.3	13.0	108.3	68.1	59.0	-41.9	-56.4	25.7	2.2	5.2	-57.7	3,554.3	2,774.5	28.1	39.2	36.9	
1149	Medihelp	1,258.0	1,312.2	-4.1	1,242.7	1,301.5	-4.5	94.5	86.6	1,189.1	1,135.7	4.7	94.6	86.5	1,175.9	1,125.7	4.5	11.1	10.8	139.5	141.6	-1.5	11.2	10.9	139.5	141.6	-1.5	-72.7	34.2	-312.6	-29.6	88.2	-133.6	4,750.8	5,643.6	-15.8	31.5	35.8	
1506	Medimed Medical Scheme	661.2	591.8	11.7	570.6	518.7	10.0	86.6	85.0	572.5	502.9	13.8	86.3	83.8	492.1	434.7	13.2	7.5	10.3	49.3	61.1	-19.3	8.6	11.8	49.3	61.1	-19.3	29.2	23.0	27.0	87.0	83.4	4.3	7,899.5	6,279.6	25.8	99.6	88.4	
1140	Medshield Medical Scheme	708.8	647.3	9.5	708.8	647.3	9.5	92.1	86.1	652.8	557.6	17.1	92.1	86.1	652.8	557.6	17.1	17.1	20.8	121.4	134.5	-9.7	17.1	20.8	121.4	134.5	-9.7	-65.3	-44.8	-45.8	-10.6	-6.5	-63.1	4,424.3	4,731.2	-6.5	52.0	60.9	
1167	Momentum Health	888.8	788.6	12.7	780.3	690.8	13.0	88.7	86.9	788.6	685.4	15.1	86.5	84.1	675.3	581.0	16.2	15.6	16.8	138.4	132.1	4.8	17.7	19.1	138.4	132.1	4.8	-33.4	-22.4	-49.1	-4.1	1.2	-441.7	1,682.9	1,768.1	-4.8	15.8	18.7	
1146	National Independent Medical Aid Society (NIMAS)	907.1	728.5	24.5	832.7	645.8	28.9	92.1	98.2	835.2	715.7	16.7	91.0	98.5	757.8	636.3	19.1	11.4	12.3	103.1	89.6	15.1	12.4	13.9	103.1	89.6	15.1	-28.2	-80.1	64.8	-4.0	-62.4	93.6	1,413.8	1,145.8	23.4	13.0	13.1	
1560	Openplan Medical Scheme	-	1,034.5	-100.0	-	962.3	-100.0	-	95.2	-	984.5	-100.0	-	94.4	-	908.7	-100.0	-	12.7	-	130.9	-100.0	-	13.6	-	130.9	-100.0	-	-77.4	100.0	-	-25.3	100.0	-	4,514.3	-100.0	-	36.4	-
1215	Oxygen Medical Scheme	870.7	751.5	15.9	825.0	714.9	15.4	91.8	89.5	798.9	672.7	18.8	91.0	88.9	750.9	635.3	18.2	16.2	14.5	141.0	108.7	29.7	17.1	15.2	141.0	108.7	29.7	-66.9	-29.2	-129.1	-50.4	-8.9	-466.3	1,174.7	1,495.9	-21.5	11.2	16.6	
1587	Pathfinder Medical Scheme	-	604.2	-100.0	-	605.4	-100.0	-	105.2	-	635.6	-100.0	-	104.3	-	631.2	-100.0	-	25.0	-	151.1	-100.0	-	25.0	-	151.1	-100.0	-	-176.9	100.0	-	-176.1	100.0	-	-2,376.8	100.0	-	-32.8	-
1546	Pharos Medical Plan	1,013.9	912.6	11.1	994.6	899.4	10.6	79.3	76.6	803.7	699.1	15.0	78.8	75.9	783.7	683.0	14.7	17.8	18.2	180.6	165.7	9.0	18.2	18.4	180.6	165.7	9.0	30.4	50.7	-40.0	52.8	72.8	-27.5	2,584.6	1,868.0	38.4	21.2	17.1	
1454	Pro Sano Medical Scheme	921.6	823.5	11.9	776.0	673.6	15.2	101.1	94.2	931.7	775.7	20.1	101.5	96.0	787.6	646.4	21.8	12.6	12.6	115.8	104.2	11.1	14.9	15.5	115.8	104.2	11.1	-127.5	-76.9	-65.8	-57.4	-32.9	-74.5	3,102.2	3,606.5	-14.0	28.1	36.5	
1196	Protea Medical Aid Society	594.0	693.2	-14.3	594.0	693.2	-14.3	103.4	93.0	614.2	644.9	-4.8	103.4	93.0	614.2	644.9	-4.8	20.2	17.5	119.8	121.2	-1.2	20.2	17.5	119.8	121.2	-1.2	-140.0	-73.0	-91.8	-109.6	-18.4	-495.7	1,350.8	3,793.2	-64.4	19.0	45.6	
1170	Purehealth Medical Scheme	1,640.0	1,379.3	18.9	1,556.4	1,310.4	18.8	91.0	83.2	1,492.0	1,147.8	30.0	91.1	83.6	1,417.5	1,095.5	29.4	10.7	11																				

## Annexure N: Detailed financial ratios: registered schemes for the years ended 31 December 2008-2009

Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29 of the Medical Schemes Act 131 of 1998)			Solvency ratio																																				
Ref no.	Name of scheme	pabpm	pabpm	%	pabpm	pabpm	%	As % of	As % of	pabpm	pabpm	%	As % of	As % of	pabpm	pabpm	%	As % of	As % of	pabpm	pabpm	%	pabpm	pabpm	%	pabpm	pabpm	%	pabpm	pabpm	%	2009	2008																														
		2009	2008	growth	2009	2008	growth	GCI	GCI	2009	2008	growth	RCI	RCI	2009	2008	growth	GCI	GCI	2009	2008	growth	RCI	RCI	2009	2008	growth	2009	2008	growth	%	%																															
		R	R		R	R		2009	2008	R	R		2009	2008	R	R		2009	2008	R	R		2009	2008		R	R		2009	2008																																	
Registered schemes: open continued																																																															
1446	Selfmed Medical Scheme	975.1	847.4	15.1	975.1	847.4	15.1	90.1	95.3	878.3	807.4	8.8	90.1	95.3	878.3	807.4	8.8	14.9	14.9	145.1	126.3	14.9	-48.4	-86.3	43.9	12.7	-24.5	151.8	5,046.6	4,539.5	11.2	43.1	44.6																														
1486	Sizwe Medical Fund	818.4	739.3	10.7	818.4	739.3	10.7	90.0	87.1	736.7	643.7	14.4	90.0	87.1	736.7	643.7	14.4	14.1	15.2	115.7	112.1	3.2	-33.9	-16.5	-105.5	-2.3	41.1	-105.6	3,758.1	3,620.8	3.8	38.3	40.8																														
1141	Spectramed	973.0	798.1	21.9	973.0	798.1	21.9	88.2	86.7	858.0	691.6	24.1	88.2	86.6	858.0	691.5	24.1	13.0	14.3	126.9	114.4	10.9	-12.0	-7.9	-51.9	2.8	5.0	-44.0	1,984.5	1,445.9	37.3	17.0	15.1																														
1464	Suremed Health	906.0	871.8	3.9	846.0	827.9	2.2	84.3	76.2	763.5	664.5	14.9	87.2	79.0	737.5	654.4	12.7	16.9	17.0	153.0	148.1	3.3	-44.5	25.4	-275.2	70.9	146.9	-51.7	8,289.8	7,938.3	4.4	76.3	75.9																														
1147	Telemed	1,474.7	1,258.5	17.2	1,446.1	1,232.9	17.3	87.4	91.1	1,289.3	1,146.7	12.4	86.8	91.1	1,254.7	1,123.4	11.7	10.3	9.5	151.8	120.0	26.5	10.5	9.7	151.8	120.0	26.5	39.5	-10.4	479.8	71.1	10.1	604.0	2,395.0	1,373.2	74.4	13.5	9.1																									
1592	Thebemed	474.3	406.5	16.7	474.3	406.5	16.7	81.4	79.6	386.1	323.7	19.3	81.4	79.6	386.1	323.7	19.3	18.3	16.8	86.8	68.4	26.9	1.3	14.4	-91.0	8.0	18.3	-56.3	814.1	493.6	64.9	14.3	10.1																														
1422	Topmed Medical Scheme	925.2	862.4	7.3	857.8	793.3	8.1	90.3	93.3	835.6	804.2	3.9	89.0	91.6	763.2	726.7	5.0	16.0	16.4	148.3	141.3	5.0	17.3	17.8	148.3	141.3	5.0	-53.8	-74.7	28.0	-15.6	-5.6	-178.6	4,107.4	4,273.3	-3.9	37.0	41.3																									
Sub-total: registered open schemes		937.7	839.2	11.7	831.1	745.1	11.5	87.7	85.4	822.4	716.8	14.7	86.6	84.1	719.4	626.6	14.8	15.0	15.3	140.4	128.7	9.1	-28.8	-10.3	-179.6	4.9	24.9	-80.3	3,088.1	3,001.1	2.9	27.4	29.8																														
Registered schemes: restricted																																																															
1005	AECI Medical Aid Society	1,240.9	1,087.9	14.1	1,240.9	1,087.9	14.1	96.7	98.1	1,200.5	1,067.0	12.5	96.7	98.1	1,200.5	1,067.0	12.5	9.1	9.8	112.6	106.1	6.1	9.1	9.8	112.6	106.1	6.1	-72.2	-85.3	15.4	3.4	-8.4	140.5	1,008.8	9,240.0	9.1	67.7	70.8																									
1487	Afriam SA Medical Scheme	1,241.3	1,156.0	7.4	1,004.9	936.2	7.3	101.2	100.7	1,255.6	1,164.4	7.8	100.8	102.9	1,013.1	962.9	5.2	12.2	8.6	151.8	99.3	52.9	15.1	10.6	151.8	99.3	52.9	-160.0	-126.0	-27.0	-85.5	-33.1	-158.3	6,881.8	6,739.7	2.1	46.2	48.6																									
1567	Afrox Medical Aid Society	854.6	756.9	12.9	854.6	756.9	12.9	96.6	94.8	825.3	717.5	15.0	96.6	94.8	825.3	717.5	15.0	10.3	10.0	87.6	75.5	16.0	10.3	10.0	87.6	75.5	16.0	-58.3	-36.2	-61.0	257.2	71.4	260.2	14,471.2	11,690.6	23.8	141.1	128.7																									
1456	Alliance Midmed Medical Scheme	935.5	879.3	6.4	840.8	791.6	6.2	93.7	85.3	876.9	750.0	16.9	94.8	86.0	797.2	680.9	17.1	10.6	10.5	99.3	92.4	7.5	11.8	11.7	99.3	92.4	7.5	-55.7	18.4	-402.7	35.2	93.4	-62.3	9,832.9	9,131.9	7.7	87.6	86.5																									
1534	Altron Medical Aid Scheme	1,095.9	989.7	10.7	876.7	791.4	10.8	102.4	90.0	1,122.3	890.7	26.0	104.0	89.3	912.0	706.4	29.1	10.8	11.3	118.6	112.3	5.6	13.5	14.2	118.6	112.3	5.6	-153.9	-27.2	-465.8	-101.2	25.9	-490.7	3,875.4	4,229.6	-8.4	29.5	35.6																									
1012	Anglo Medical Scheme	1,211.5	1,057.1	14.6	1,027.7	890.3	15.4	100.8	99.7	1,220.9	1,054.5	15.8	101.6	101.4	1,044.2	902.7	15.7	7.7	7.6	92.8	80.7	15.0	9.0	9.1	92.8	80.7	15.0	-109.2	-93.1	-17.3	784.0	-122.3	741.0	66,658.0	57,011.3	16.9	458.5	449.4																									
1571	Anglovaal Group Medical Scheme	1,174.8	1,033.0	13.7	881.3	775.7	13.6	93.2	95.8	1,094.6	989.5	10.6	92.8	96.8	818.1	750.8	9.0	11.1	11.3	129.9	116.4	11.6	14.7	15.0	129.9	116.4	11.6	-66.7	-91.4	27.0	6.6	-49.7	11,133.1	11,997.4	12,071.6	-0.6	85.1	97.4																									
1279	Bankmed	1,019.3	936.9	8.8	871.7	787.2	10.7	91.7	89.7	934.4	840.6	11.2	90.6	90.2	789.8	710.4	11.2	10.3	9.9	105.3	92.3	14.1	12.1	11.7	105.3	92.3	14.1	-23.4	-15.5	-51.0	23.4	43.3	-46.0	6,249.3	5,922.0	5.5	51.1	52.7																									
1507	Barloworld Medical Scheme	1,380.3	1,243.8	11.0	1,380.3	1,243.8	11.0	96.1	92.0	1,327.0	1,144.3	16.0	96.1	92.0	1,327.0	1,144.3	16.0	7.7	7.6	106.2	94.6	12.3	7.7	7.6	106.2	94.6	12.3	-52.9	4.9	-1,179.6	43.6	64.4	-32.3	9,094.8	8,730.5	4.2	54.9	58.5																									
1557	BHP Billiton SA Medical Scheme	-	398.6	-100.0	-	398.6	-100.0	-	100.4	-	400.1	-100.0	-	100.4	-	400.1	-100.0	-	15.7	-	62.6	-100.0	-	15.7	-	62.6	-100.0	-	-64.0	100.0	-	1,240.3	-100.0	-	-	-	-	-	-	-																							
1115	Biz Health Medical Scheme	-	797.1	-100.0	-	769.1	-100.0	-	92.6	-	738.4	-100.0	-	93.0	-	715.1	-100.0	-	19.4	-	154.5	-100.0	-	20.1	-	154.5	-100.0	-	-100.5	100.0	-	-68.4	100.0	-	-	-	-	-	-	-																							
1526	BMWV Employees Medical Aid Society	894.4	814.2	9.9	885.5	773.5	14.5	115.5	114.0	1,032.7	928.5	11.2	105.1	118.9	930.2	919.6	1.2	7.9	9.0	70.9	73.6	-3.7	8.0	9.5	70.9	73.6	-3.7	-115.7	-219.8	47.4	80.0	-168.6	147.4	85,193	7,195.8	18.4	79.4	73.7																									
1237	BP Medical Aid Society	934.9	830.2	12.6	934.9	830.2	12.6	119.1	112.7	1,113.9	935.2	19.1	119.1	112.7	1,113.9	935.2	19.1	8.6	8.2	80.6	67.7	19.1	8.6	8.2	80.6	67.7	19.1	-259.6	-172.8	-50.2	-0.7	71.0	-101.0	9,839.7	9,078.6	8.4	87.7	91.1																									
1590	Building & Construction Industry Medical Aid Fund	378.7	333.7	13.5	378.7	333.7	13.5	84.6	81.1	320.2	270.8	18.2	84.6	81.1	320.2	270.8	18.2	14.6	14.4	55.2	48.0	15.0	14.6	14.4	55.2	48.0	15.0	3.3	14.9	-77.9	29.6	40.7	-27.3	3,047.3	2,795.2	9.0	67.1	69.8																									
1593	Built Environment Professional Associations Medical Scheme (BEPS)	956.4	878.0	8.9	808.9	704.4	14.8	85.8	85.3	820.3	748.9	9.5	82.5	82.4	667.0	580.5	14.9	8.7	13.6	82.8	119.6	-30.8	10.2	17.0	82.8	119.6	-30.8	59.1	4.4	1,243.2	67.6	12.1	458.7	1,157.2	350.4	230.3	10.1	3.3																									
1158	Cawmed Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-																								
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	1,158.0	1,055.4	9.7	1,068.6	974.6	9.6	86.7	81.9	1,003.7	863.9	16.2	86.9	81.8	929.1	797.1	16.6	13.4	13.3	155.3	140.6	10.5	14.5	14.4	155.3	140.6	10.5	-15.7	36.9	-142.5	26.1	83.2	-68.6	5,474.8	5,525.1	-0.9	39.4	43.6																									

## Annexure N: Detailed financial ratios: registered schemes for the years ended 31 December 2008-2009

Ref no.	Name of scheme	Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)					Net relevant healthcare expenditure incurred (incl. managed healthcare claims)					Gross non-healthcare expenses (incl. PMSA)					Net non-healthcare expenses					Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29 of the Medical Schemes Act 131 of 1998)			Solvency ratio			
		pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	As % of GCI	As % of GCI	pabpm 2009	pabpm 2008	% growth	As % of RCI	As % of RCI	pabpm 2009	pabpm 2008	% growth	As % of GCI	As % of GCI	pabpm 2009	pabpm 2008	% growth	As % of RCI	As % of RCI	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	2009 %	2008 %		
		R	R		R	R		2009	2008	R	R		RCI	RCI	R	R		2009	2008	R	R		2009	2008	R	R		R	R		R	R		R	R					
Registered schemes: restricted continued																																								
1521	Clicks Group Medical Scheme	6206	535.9	15.8	6206	535.9	15.8	86.5	74.1	537.1	396.9	35.3	86.5	74.0	536.9	396.4	35.4	15.7	13.4	97.7	71.6	36.5	15.7	13.4	97.7	71.6	36.5	-13.9	67.8	-120.5	21.6	92.7	-76.7	4,792.1	2,531.3	89.3	64.3	39.4		
1068	De Beers Benefit Society	1,102.7	893.2	23.5	1,102.7	893.2	23.5	101.0	101.3	1,114.2	904.9	23.1	101.0	101.3	1,114.2	904.9	23.1	8.0	7.5	88.1	67.2	31.1	8.0	7.5	88.1	67.2	31.1	-99.7	-78.8	-26.5	86.6	32.9	163.2	17,085.8	15,122.6	13.0	129.1	141.1		
1484	Edcon Medical Aid Scheme	887.4	791.6	12.1	710.4	629.1	12.9	91.2	94.3	809.0	746.7	8.3	89.6	94.2	636.6	592.9	7.4	13.8	14.5	122.6	114.7	6.9	17.3	18.2	122.6	114.7	6.9	-48.8	-78.5	37.8	-23.6	-40.8	42.2	3,316.3	3,586.6	-7.5	31.1	37.8		
1572	Engen Medical Benefit Fund	1,180.4	1,056.5	11.7	1,003.3	898.0	11.7	92.9	89.2	1,096.1	942.9	16.2	93.5	89.4	938.1	802.9	16.8	7.1	7.0	84.3	73.9	14.1	8.4	8.2	84.3	73.9	14.1	-19.1	21.2	-190.1	41.3	73.3	-43.7	7,795.0	7,443.7	4.7	55.0	58.7		
1585	Eyethumed Medical Scheme	401.4	360.2	11.4	401.4	360.2	11.4	100.6	94.7	403.9	341.3	18.3	100.6	94.7	403.9	341.3	18.3	21.3	20.6	85.5	74.2	15.2	21.3	20.6	85.5	74.2	15.2	-88.0	-55.2	-59.4	-46.0	-14.8	-210.8	3,158.2	3,209.1	-1.6	65.6	74.2		
1271	Fishing Industry Medical Scheme (Fishmed)	157.3	136.0	15.7	157.3	136.0	15.7	79.7	69.5	125.4	94.6	32.6	79.7	69.5	125.4	94.6	32.6	26.9	30.5	42.3	41.5	1.9	26.9	30.5	42.3	41.5	1.9	-10.4	-	-100.0	9.9	22.0	-55.0	2,922.5	2,556.3	14.3	154.8	156.7		
1086	Food Workers Medical Benefit Fund	70.0	58.8	19.0	70.0	58.8	19.0	58.0	58.9	40.6	34.6	17.3	58.0	58.9	40.6	34.6	17.3	21.0	20.5	14.7	12.1	21.5	21.0	20.5	14.7	12.1	21.5	14.7	12.1	21.5	25.4	20.9	21.5	2,964.4	2,539.9	16.7	353.1	360.2		
1578	Foschini Group Medical Aid Scheme	808.2	759.0	6.5	808.2	759.0	6.5	105.3	97.3	851.3	738.7	15.2	105.3	97.3	851.3	738.7	15.2	10.0	10.0	80.6	76.0	6.1	10.0	10.0	80.6	76.0	6.1	-123.7	-55.7	-122.1	-68.5	20.7	-430.9	6,450.6	7,994.7	-19.3	66.5	87.8		
1568	Gold Fields Medical Scheme	730.3	641.6	13.8	730.3	641.6	13.8	93.4	93.2	682.1	598.1	14.0	93.4	93.2	682.1	598.1	14.0	13.4	14.2	98.0	90.8	7.9	13.4	14.2	98.0	90.8	7.9	-49.8	-47.3	-5.3	-4.4	4.9	-189.8	6,233.8	6,792.4	-8.2	71.1	88.2		
1270	Golden Arrow Employees Medical Benefit Fund	246.0	215.8	14.0	246.0	215.8	14.0	161.1	165.1	396.2	356.3	11.2	161.1	165.1	396.2	356.3	11.2	24.1	23.9	59.3	51.5	15.1	24.1	23.9	59.3	51.5	15.1	-209.6	-192.0	-9.2	1.9	-2.0	195.0	2,946.8	3,064.3	-3.8	99.8	118.3		
1598	Government Employees Medical Scheme (GEMS)	747.7	673.5	11.0	732.6	658.2	11.3	91.0	85.5	680.0	576.1	18.0	91.1	85.6	667.6	563.6	18.5	6.7	6.1	49.8	40.9	21.8	6.8	6.2	49.8	40.9	21.8	15.2	53.6	-71.6	22.1	61.2	-63.9	994.4	1,043.5	-4.7	11.1	12.9		
1523	Grintek Electronics Medical Aid Scheme	856.0	794.3	7.8	856.0	794.3	7.8	108.0	105.2	924.6	835.9	10.6	107.7	104.8	922.2	832.3	10.8	12.4	12.5	106.0	99.1	7.0	12.4	12.5	106.0	99.1	7.0	-172.1	-137.1	-25.5	-91.3	-28.1	-224.9	9,981.0	10,205.5	-8.1	91.3	107.1		
1111	IBM (SA) Medical Scheme	930.2	832.2	11.8	759.3	666.6	13.9	96.3	84.1	896.0	699.5	28.1	94.9	80.4	720.6	535.8	34.5	12.2	12.4	113.2	103.0	9.9	14.9	15.4	113.2	103.0	9.9	-74.5	27.8	-368.0	-47.9	63.9	-175.0	3,016.8	3,670.9	-17.8	27.0	36.8		
1591	Impala Medical Plan	260.6	239.4	8.9	260.6	239.4	8.9	90.5	93.6	235.9	224.2	5.2	90.5	93.6	235.9	224.2	5.2	1.3	1.4	3.3	3.3	-	1.3	1.4	3.3	3.3	-	21.5	12.0	79.2	21.8	11.7	86.3	886.1	676.9	30.9	28.3	23.6		
1559	Imperial Group Medical Scheme	922.5	834.6	10.5	922.5	834.6	10.5	94.8	89.8	874.4	749.3	16.7	94.6	89.5	872.9	746.8	16.9	11.3	11.5	104.1	95.9	8.6	11.3	11.5	104.1	95.9	8.6	-54.5	-8.2	-564.6	-54.0	35.0	-254.3	10,718.0	10,733.0	-0.1	96.8	107.2		
1145	LA-Health Medical Scheme	1,182.1	1,136.7	4.0	979.8	977.8	0.2	88.0	87.6	1,039.9	995.9	4.4	86.1	85.4	843.8	835.5	1.0	12.5	12.4	148.3	141.2	5.0	15.1	14.4	148.3	141.2	5.0	-12.3	1.1	-1,218.2	32.5	62.3	-47.8	4,754.9	4,900.4	-3.0	33.5	35.9		
1197	Licare Medical Scheme	1,111.3	942.5	17.9	889.8	727.4	22.3	90.5	93.3	1,006.3	879.8	14.4	91.0	96.6	809.4	702.8	15.2	10.1	10.7	112.6	100.8	11.7	12.7	13.9	112.6	100.8	11.7	-32.2	-76.2	57.7	52.3	-77.4	167.6	10,278.0	10,056.4	2.2	77.1	88.9		
1599	Lonmin Medical Scheme	405.6	370.1	9.6	405.6	370.1	9.6	80.2	78.1	325.2	289.1	12.5	80.2	78.1	325.2	289.1	12.5	18.9	21.4	76.6	79.0	-3.0	18.9	21.4	76.6	79.0	-3.0	3.9	2.0	95.0	22.4	23.8	-5.9	923.9	714.9	29.2	19.0	16.1		
1547	Malcor Medical Scheme	1,051.1	1	9.0	1,036.9	1	9.0	102.9	103.9	1,081.3	1	7.9	103.2	104.3	1,069.9	1	7.8	12.2	13.0	128.2	0	2.0	12.4	13.2	128.2	0	2.0	-161.1	(0)	3.4	27.2	0	3,785.7	3,453.6	3	5.6	27.4	28.3		
1042	Mascom Medical Scheme	-	1,633.9	-100.0	-	1,313.6	-100.0	-	126.9	-	2,074.0	-100.0	-	132.6	-	1,742.4	-100.0	-	9.5	-	155.0	-100.0	-	11.8	-	155.0	-100.0	-	-	-583.7	100.0	-	-409.1	100.0	-	5,281.7	-100.0	-	26.9	n
1495	Massmart Health Plan	1,195.4	1,107.9	7.9	896.4	830.8	7.9	89.6	79.4	1,070.5	879.6	21.7	95.9	83.5	859.7	693.7	23.9	8.4	8.7	100.4	96.9	3.6	11.2	11.7	100.4	96.9	3.6	-63.7	40.3	-258.1	35.0	155.5	-77.5	10,293.4	10,983.9	-6.3	71.8	82.6		
1039	MBMed Medical Aid Fund	792.1	725.3	9.2	792.1	725.3	9.2	104.5	92.5	827.8	670.5	23.5	104.5	92.5	827.8	670.5	23.5	9.3	9.5	73.7	69.0	6.8	9.3	9.5	73.7	69.0	6.8	-109.3	-14.3	-664.3	-30.9	37.2	-183.1	6,226.5	6,165.7	1.0	65.5	70.8		
1588	MEDCOR	832.6	692.8	20.2	832.6	692.8	20.2	102.0	98.1	849.5	679.6	25.0	102.0	98.1	849.5	679.6	25.0	13.6	9.7	113.2	67.5	67.7	13.6	9.7	113.2	67.5	67.7	-130.1	-54.3	-139.6	-110.0	-30.3	-263.0	1,090.8	1,712.6	-36.3	10.9	20.6		
1548	Medipos Medical Scheme	1,005.2	888.6	13.1	774.5	685.4	13.0	95.7	94.3	962.0	837.9	14.8	97.3	96.9	753.9	664.0	13.5	9.8	9.6	98.1	85.4	14.9	12.7	12.5	98.1	85.4	14.9	-77.5	-63.9	-21.3	45.3	195.5	-76.8	11,074.0	11,091.0	-0.2	91.8	104.0		
1535	Metrocare	1,162.8	1,046.0	11.2	1,162.8	1,046.0	11.2	104.0	92.1	1,208.9	963.8	25.4	104.0	92.1	1,208.9	963.8	25.4	7.8	8.0	90.8	83.9	8.2	7.8	8.0	90.8	83.9	8.2	-136.9	-1.6	-8,456.3	56.4	143.2	-60.6	24,665.3	21,978.1	12.2	176.8	175.1		
1105	Metropolitan Medical Scheme	787.2	728.2	8.1	787.2	728.2	8.1	98.0	92.7	771.4	675.2	14.2	98.0	92.7	771.4	675.2	14.2	9.8	9.6	77.4	70.2	10.3	9.8	9.6	77.4	70.2	10.3	-61.6	-17.1	-260.2	11.4	55.3	-79.4	6,534.0	6,650.1	-1.7	69.2	76.1		
1569	Minemed Medical Scheme	972.0	809.5	20.1	972.0																																			



Annexure N: Detailed financial ratios: registered schemes for the years ended 31 December 2008-2009

Ref no.	Name of scheme	Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)					Net relevant healthcare expenditure incurred (incl. managed healthcare claims)					Gross non-healthcare expenses (incl. PMSA)					Net non-healthcare expenses					Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29 of the Medical Schemes Act 131 of 1998)			Solvency ratio																															
		pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	As % of GCI	As % of GCI	pabpm 2009	pabpm 2008	% growth	As % of RCI	As % of RCI	pabpm 2009	pabpm 2008	% growth	As % of GCI	As % of GCI	pabpm 2009	pabpm 2008	% growth	As % of RCI	As % of RCI	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	2009 %	2008 %																														
		R	R		R	R		2009	2008	R	R		2009	2008	R	R		2009	2008	R	R		2009	2008	R	R		R	R		R	R		R	R		%	%																														
Registered schemes: restricted continued																																																																				
1241	Naspers Medical Fund	972.0	907.6	7.1	798.0	727.8	9.6	106.4	100.0	1,034.5	907.3	14.0	108.9	102.9	869.3	748.9	16.1	10.6	10.2	102.8	92.7	10.9	12.9	12.7	100.3	92.7	10.9	-174.1	-113.8	-53.0	-77.7	-78.3	0.8	6,012.4	6,961.7	-13.6	51.5	63.9																														
1469	Nedgroup Medical Aid Scheme	867.7	771.3	12.5	813.3	722.9	12.5	97.7	96.7	847.4	745.6	13.7	98.0	97.3	797.1	703.3	13.3	11.6	11.4	100.3	87.8	14.2	12.3	12.2	100.3	87.8	14.2	-84.1	-68.3	-23.1	63.2	27.8	127.3	4,700.1	4,405.8	6.7	45.1	47.6																														
1584	Netcare Medical Scheme	998.4	943.3	5.8	851.6	802.0	6.2	90.7	85.7	906.1	808.4	12.1	90.6	85.1	771.6	682.3	13.1	7.6	8.7	76.2	81.7	-6.7	8.9	10.2	76.2	81.7	-6.7	3.8	38.1	-90.0	63.4	92.8	-31.7	6,473.6	6,247.9	3.6	54.0	55.2																														
1214	Old Mutual Staff Medical Aid Fund	825.6	717.9	15.0	795.0	693.4	14.7	94.9	101.2	783.9	726.6	7.9	94.3	100.3	749.7	695.4	7.8	11.6	11.6	95.9	83.3	15.1	12.1	12.0	95.9	83.3	15.1	-50.5	-85.2	40.7	-11.7	-49.9	76.6	4,065.9	4,134.5	-1.7	41.0	48.0																														
1441	Parmed Medical Aid Scheme	2,066.9	1,777.5	16.3	2,066.9	1,777.5	16.3	88.3	90.2	1,825.6	1,603.1	13.9	88.3	90.2	1,825.6	1,603.1	13.9	5.4	5.0	111.1	88.6	25.4	5.4	5.0	111.1	88.6	25.4	130.2	85.9	51.6	250.2	213.9	17.0	16,294.5	13,688.8	19.0	65.7	64.2																														
1515	PG Bison Medical Aid Society	1,190.6	1,119.0	6.4	1,190.6	1,119.0	6.4	88.7	78.0	1,056.7	872.6	21.1	88.7	78.0	1,056.7	872.6	21.1	10.4	10.5	124.2	117.4	5.8	10.4	10.5	124.2	117.4	5.8	9.7	129.0	-92.5	140.4	249.7	-43.8	19,462.4	14,728.7	32.1	136.2	109.7																														
1186	PG Group Medical Scheme	1,350.3	1,224.7	10.3	1,016.6	926.4	9.7	87.1	87.8	1,176.8	1,075.9	9.4	89.2	89.7	907.0	830.7	9.2	6.9	6.8	93.4	83.3	12.1	9.2	9.0	93.4	83.3	12.1	16.2	12.4	30.6	242.4	165.0	46.9	17,864.7	16,175.6	10.4	110.3	110.1																														
1563	Pick & Pay Medical Scheme	934.7	843.1	10.9	701.6	632.8	10.9	83.1	84.7	776.9	714.5	8.7	80.5	83.6	564.7	529.3	6.7	10.3	10.4	96.1	87.8	9.5	13.7	13.9	96.1	87.8	9.5	40.9	15.8	158.9	83.7	97.6	-14.2	9,095.2	8,639.6	5.3	81.1	85.4																														
1583	Platinum Health	493.9	451.6	9.4	493.9	451.6	9.4	112.5	100.2	555.6	452.6	22.8	112.5	100.2	555.6	452.6	22.8	8.5	6.5	42.0	29.4	42.9	8.5	6.5	42.0	29.4	42.9	-103.8	-30.5	-240.3	-41.6	39.2	-206.1	1,898.0	2,569.8	-26.1	32.0	47.4																														
1194	Profmed	899.5	791.7	13.6	899.5	791.7	13.6	91.8	90.2	825.6	714.0	15.6	91.8	90.2	825.6	714.0	15.6	13.3	12.8	119.3	101.7	17.3	13.3	12.8	119.3	101.7	17.3	-45.4	-24.0	-89.2	-1.8	5.5	-132.7	4,867.9	4,892.9	-0.5	45.1	51.5																														
1516	Quantum Medical Aid Society	704.1	632.4	11.3	586.8	513.3	14.3	95.0	98.6	668.9	623.8	7.2	93.2	98.6	546.9	506.2	8.0	14.7	14.9	103.6	94.3	9.9	17.7	18.4	103.6	94.3	9.9	-63.7	-87.2	26.9	-5.7	14.4	-139.6	9,685.5	9,508.8	1.9	114.6	125.3																														
1201	Rand Water Medical Scheme	1,038.4	969.6	7.1	1,038.4	969.6	7.1	102.1	98.4	1,060.6	953.7	11.2	102.1	98.4	1,060.6	953.7	11.2	6.6	6.2	68.7	60.0	14.5	6.6	6.2	68.7	60.0	14.5	-90.9	-44.0	-106.6	-0.4	74.7	-100.5	11,944.0	12,337.3	-3.2	95.9	106.0																														
1430	Remedi Medical Aid Scheme	1,072.5	975.0	10.0	975.3	849.8	14.8	90.4	90.2	969.2	879.8	10.2	90.8	92.1	885.7	782.9	13.1	7.3	7.1	78.4	69.4	13.0	8.0	8.2	78.4	69.4	13.0	11.2	-2.5	548.0	50.0	49.8	0.4	6,330.1	5,947.1	6.4	49.2	50.8																														
1176	Retail Medical Scheme	740.3	748.9	-1.1	662.5	660.6	0.3	81.6	75.1	604.0	562.4	7.4	79.6	72.2	527.4	477.1	10.5	14.6	13.1	107.8	98.3	9.7	16.3	14.9	107.8	98.3	9.7	27.3	85.2	-68.0	84.4	149.7	-43.6	8,750.7	8,979.1	-2.5	98.5	99.9																														
1013	Rhodes University Medical Scheme	909.0	809.4	12.3	909.0	809.4	12.3	90.2	90.9	819.6	735.5	11.4	90.2	90.9	819.6	735.5	11.4	9.5	10.6	86.6	85.4	1.4	9.5	10.6	86.6	85.4	1.4	2.8	-11.5	124.3	75.7	80.9	-6.4	10,150.3	9,733.5	4.3	93.1	100.2																														
1209	SA Breweries Medical Aid Society	885.1	805.0	10.0	812.3	739.2	9.9	89.2	84.9	789.1	683.7	15.4	89.9	85.6	730.3	632.4	15.5	10.0	10.0	88.3	80.5	9.7	10.9	10.9	88.3	80.5	9.7	-6.4	26.3	-124.3	78.5	76.1	3.2	9,289.3	8,708.7	6.7	87.5	90.1																														
1424	SABC Medical Aid Scheme	1,257.1	1,157.6	8.6	1,068.4	983.9	8.6	92.8	86.8	1,166.6	1,005.1	16.1	97.3	90.9	1,039.6	894.3	16.2	7.0	6.3	87.6	72.5	20.8	8.2	7.4	87.6	72.5	20.8	-58.7	17.2	-441.3	1.8	82.5	-97.8	7,661.3	7,958.5	-3.7	50.8	57.3																														
1038	SAMWUMed	556.5	434.1	28.2	556.5	434.1	28.2	80.3	101.3	446.8	439.5	1.7	80.3	101.3	446.8	439.5	1.7	7.9	9.3	44.1	40.3	9.4	7.9	9.3	44.1	40.3	9.4	65.6	-45.7	243.5	95.3	-14.5	757.2	3,995.7	3,042.0	31.4	59.8	58.4																														
1527	Stapfi Medical Aid Scheme	1,211.8	1,069.5	13.3	1,019.0	899.1	13.3	94.9	93.4	1,149.8	998.7	15.1	95.6	94.2	973.9	847.2	15.0	7.0	7.1	84.9	76.3	11.3	8.3	8.5	84.9	76.3	11.3	-39.9	-24.3	-64.2	22.8	45.8	-50.2	6,216.9	5,870.4	5.9	42.8	45.7																														
1234	Sasolmed	1,062.4	989.4	7.4	1,062.4	989.4	7.4	90.4	87.6	960.0	867.1	10.7	90.4	87.6	960.0	867.1	10.7	7.0	6.5	74.5	64.0	16.4	7.0	6.5	74.5	64.0	16.4	28.0	58.3	-52.0	72.4	110.0	-34.2	5,948.2	5,668.3	4.9	46.7	47.7																														
1531	Sedmed	733.8	669.7	9.6	733.8	669.7	9.6	98.0	89.4	719.3	598.4	20.2	98.0	89.4	719.3	598.4	20.2	3.3	2.6	24.0	17.6	36.4	3.3	2.6	24.0	17.6	36.4	-9.4	53.7	-117.5	67.9	123.4	-45.0	6,092.9	5,259.8	15.8	69.2	65.5																														
1243	Siemens Medical Scheme	1,194.0	1,115.6	7.0	895.9	837.2	7.0	94.9	92.7	1,132.9	1,034.6	9.5	104.1	102.0	932.2	853.8	9.2	8.4	8.3	100.8	93.0	8.4	11.2	11.1	100.8	93.0	8.4	-137.1	-109.6	-25.1	-56.0	-36.4	-53.8	7,454.6	8,086.0	-7.8	52.0	60.4																														
1389	Solvi Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-																														
1580	South African Police Service Medical Scheme (POLMED)	757.2	688.0	10.1	757.2	688.0	10.1	98.6	94.8	746.9	652.1	14.5	98.6	94.8	746.9	652.1	14.5	6.9	6.9	52.6	47.4	11.0	6.9	6.9	52.6	47.4	11.0	-42.2	-11.5	-267.0	-14.0	22.0	-163.6	2,650.3	2,945.4	-10.0	29.2	35.7																														
1254	Stocksmed	1,207.7	1,066.6	13.2	905.8	800.0	13.2	102.5	98.2	1,238.4	1,047.7	18.2	110.6	105.8	1,002.3	846.4	18.4	9.7	10.2	117.0	108.4	7.9	12.9	13.5	117.0	108.4	7.9	-213.4	-154.8	-37.9	-88.0	-5.4	-1,529.6	13,396.9	13,914.1	-3.7	92.4	108.7																														
1544	Tiger Brands Medical Scheme	1,119.6	979.4	14.3	1,119.6	979.4	14.3	97.6	104.8	1,092.9	1,026.8	6.4	97.6	104.8	1,092.9	1,026.8	6.4	7.5	7.6	83.7	74.2	12.8	7.5	7.6	83.7	74.2	12.8	-57.0	-121.6	53.1	9.8	-43.7	1,224.4	6,934.5	6,759.4	2.6	51.6	57.5																														
1582	Transmed Medical Fund	730.9	683.6	6.9	682.7	634.0	7.7	106.1	100.5	775.5	687.1	12.9	106.4	100.8	726.3	638.9	13.7	11.0	10.4	80.6	71.2	13.2	11.8	11.2	80.6	71.2	13.2	-124.3	-76.1	-63.33																																						



## Annexure N: Detailed financial ratios: registered schemes for the years ended 31 December 2008-2009

		Gross Contribution Income (GCI)			Risk Contribution Income (RCI)			Gross relevant healthcare expenditure incurred (incl. PMSA and managed healthcare claims)					Net relevant healthcare expenditure incurred (incl. managed healthcare claims)					Gross non-healthcare expenses (incl. PMSA)					Net non-healthcare expenses					Net healthcare result			Net surplus/ (deficit) after consolidation results			Year-end reserve position (per Regulation 29 of the Medical Schemes Act 131 of 1998)			Solvency ratio			
		pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	As % of GCI	As % of GCI	pabpm 2009	pabpm 2008	% growth	As % of RCI	As % of RCI	pabpm 2009	pabpm 2008	% growth	As % of GCI	As % of GCI	pabpm 2009	pabpm 2008	% growth	As % of RCI	As % of RCI	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	pabpm 2009	pabpm 2008	% growth	2009 %	2008 %		
Ref no.	Name of scheme	R	R		R	R		2009	2008	R	R		2009	2008	R	R		2009	2008	R	R		2009	2008	R	R		R	R		R	R		R	R					
Registered schemes: restricted continued																																								
1597	Umvuzo Health Medical Scheme	437.4	387.8	12.8	437.4	387.8	12.8	82.1	82.5	359.1	320.1	12.2	82.0	82.4	358.6	319.5	12.2	17.1	13.6	74.9	52.7	42.1	17.1	13.6	74.9	52.7	42.1	3.8	15.7	-75.8	11.2	23.1	-51.5	762.3	574.9	32.6	14.5	12.4		
1520	University of Kwa-Zulu Natal Medical Scheme	963.8	872.2	10.5	723.1	654.7	10.4	93.7	80.8	902.7	704.5	28.1	97.6	82.1	705.8	537.5	31.3	11.8	11.6	113.9	101.1	12.7	15.7	15.4	113.9	101.1	12.7	-96.6	16.1	-700.0	2.0	119.3	-98.3	8911.8	8474.8	5.2	77.1	81.0		
1282	University of the Witwatersrand Staff Medical Aid Scheme	1,272.4	1,105.8	15.1	1,272.4	1,105.8	15.1	96.6	93.9	1,228.9	1,038.6	18.3	96.6	93.9	1,228.9	1,038.6	18.3	8.7	8.7	110.9	95.9	15.6	8.7	8.7	110.9	95.9	15.6	-67.4	-28.7	-134.8	-7.0	85.4	-108.2	8,865.2	8,986.6	-1.4	58.1	67.7		
1291	Witbank Coalfields Medical Aid Scheme	854.2	810.2	5.4	648.5	609.3	6.4	88.3	89.0	754.0	721.3	4.5	88.8	90.5	575.7	551.1	4.5	4.8	4.8	41.3	39.1	5.6	6.4	6.4	41.3	39.1	5.6	31.5	19.1	64.9	114.8	115.5	-0.6	10,937.5	10,634.7	2.8	106.7	109.4		
1293	Wooltru Healthcare Fund	763.4	685.6	11.3	763.4	685.6	11.3	95.6	97.0	729.9	664.8	9.8	95.6	97.0	729.9	664.8	9.8	11.9	13.9	90.5	95.5	-5.2	11.9	13.9	90.5	95.5	-5.2	-57.1	-74.7	23.6	11.7	2.0	485.0	7,862.3	7,714.2	1.9	85.8	93.8		
1253	Xsrota Medical Aid Scheme	559.4	525.2	6.5	559.4	525.2	6.5	100.2	91.6	560.3	481.3	16.4	100.2	91.6	560.3	481.3	16.4	10.2	10.7	57.2	56.3	1.6	10.2	10.7	57.2	56.3	1.6	-58.1	-12.3	-372.4	-28.1	13.5	-308.1	2,411.5	2,982.4	-19.1	35.9	47.3		
Sub-total: registered restricted schemes		816.0	735.7	10.9	774.5	693.8	11.6	93.9	91.7	765.9	674.7	13.5	93.9	92.0	727.5	638.0	14.0	8.8	8.8	71.6	64.9	10.3	9.2	9.4	71.6	64.9	10.3	-24.6	-9.2	-167.4	18.2	32.2	-43.5	4,160.7	4,389.9	-5.2	42.5	49.7		
Total registered schemes		890.0	801.0	11.1	808.9	726.2	11.4	89.9	87.6	800.3	701.3	14.1	89.3	86.9	722.6	630.8	14.6	12.7	13.1	113.4	105.2	7.8	14.0	14.5	113.4	105.2	7.8	-27.1	-9.9	-173.7	10.1	27.6	-63.4	3,508.6	3,513.3	-0.1	32.9	36.6		

### Notes

- An encumbered asset was excluded in the calculation of the solvency ratio.
- The scheme was registered in 2005 and a phase-in solvency ratio of 22.0% applies.
- The scheme was registered in 2006 and a phase-in solvency ratio of 17.5% applies.
- The scheme was registered in 2007 and a phase-in solvency ratio of 13.5% applies.
- The scheme was registered in 2008 and a phase-in solvency ratio of 13.5% applies.
- The scheme was registered in 2009 and a phase-in solvency ratio of 10.0% applies.
- Government Employees Medical Scheme (GEMS) was registered on 1 January 2005 but only started operations with effect from 1 January 2006.
- BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.
- Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009.
- Solvita Medical Scheme was registered with effect from 1 January 2008. The scheme was subsequently liquidated on 16 January 2009.
- Biz Health Medical Scheme was liquidated with effect from 30 April 2008.
- Cawmed Medical Scheme was liquidated with effect from 1 September 2008.
- The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.
- Mascom Medical Scheme was liquidated with effect from 31 December 2008.



Annexure N: Detailed financial ratios: registered schemes for the years ended 31 December 2008-2009

Notes (continued)

- o Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.
- p Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.
- q Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- r Stocksmmed was liquidated with effect from 31 December 2009.

Prior year figures have been restated.  
PMSA = Personal Medical Savings Account  
Net relevant healthcare expenditure incurred (incl. managed healthcare claims) includes risk transfer arrangements.

RCI = Risk Contribution Income  
GCI = Gross Contribution Income  
pabpm = per average beneficiary per month  
pab = per average beneficiary

The scheme liquidated in 2008. No figures were submitted at the time of finalising the Annual Report.  
Cawmed Medical Scheme was liquidated with effect from 1 September 2008.  
The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.  
Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.

The schemes liquidated in 2008 and 2009. Figures were submitted.  
Health Medical Scheme was liquidated with effect from 30 April 2008.  
Mascom Medical Scheme was liquidated with effect from 31 December 2008.  
Purehealth Medical Scheme was liquidated with effect from 31 December 2009.  
Stocksmmed was liquidated with effect from 31 December 2009.

The scheme was deregistered in 2008.  
Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.

The following schemes amalgamated in 2008 and 2009:  
Global Health amalgamated with Munimed with effect from 1 January 2008.  
Cimas Wellness Medical Scheme amalgamated with Compicare Medical Scheme with effect from 1 January 2008.  
Lifemed Medical Scheme amalgamated with Compicare Medical Scheme with effect from 1 January 2008.  
Meridian Health amalgamated with Momentum Health with effect from 1 January 2008.  
BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.  
Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009.

The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm	R'000	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	2009 %	
Registered schemes: open																											
1252	Bestmed Medical Scheme	Blue Print Health Plan	6,757	12,397	27.5	2.8	78,140	525.3	78,140	525.3	58,280	74.6	391.8	58,151	74.4	390.9	23,527	30.1	158.1	23,527	30.1	158.1	(3,537)	-4.5	-23.8		
		Bonus Plus	13,288	35,928	30.9	3.5	378,915	878.9	295,665	685.8	323,082	85.3	749.4	253,248	85.7	587.4	64,751	17.1	150.2	64,751	21.9	150.2	(22,334)	-5.9	-51.8		
		Millennium Basic	5,083	9,490	27.9	2.3	58,494	513.6	49,903	438.2	36,193	61.9	317.8	28,765	57.6	252.6	20,475	35.0	179.8	20,475	41.0	179.8	662	1.1	5.8		
		Millennium Comprehensive	4,564	9,451	45.8	22.7	176,898	1,559.8	150,428	1,326.4	160,027	90.5	1,411.0	130,646	86.8	1,152.0	17,577	9.9	155.0	17,577	11.7	155.0	2,205	1.2	19.4		
		Millennium Standard	4,918	9,708	36.2	11.4	100,466	862.4	85,443	733.4	80,998	80.6	695.3	66,001	77.2	566.6	21,348	21.2	183.2	21,348	25.0	183.2	(1,905)	-1.9	-16.4		
		Topcare	5,678	12,816	41.0	16.4	242,609	1,577.5	194,101	1,262.1	225,814	93.1	1,468.3	183,237	94.4	1,191.5	20,734	8.5	134.8	20,734	10.7	134.8	(9,870)	-4.1	-64.2		
		Vital Care	513	851	29.9	3.3	3,160	309.5	3,160	309.5	902	28.5	88.3	902	28.5	88.3	1,628	51.5	159.4	1,628	51.5	159.4	631	20.0	61.8		
		Consolidated	40,801	90,641	33.7	7.9	1,038,682	954.9	856,842	787.8	885,295	85.2	813.9	720,949	84.1	662.8	170,040	16.4	156.3	170,040	19.8	156.3	(34,148)	-3.3	-31.4	43.4	
1512	Bonitas Medical Fund	Boncap	24,714	32,215	34.7	3.9	125,131	323.7	125,131	323.7	122,645	98.0	317.3	122,645	98.0	317.3	55,612	44.4	143.9	55,612	44.4	143.9	(53,125)	-42.5	-137.4		
		BonComprehensive	3,921	8,902	38.1	12.9	161,747	1,514.1	129,328	1,210.7	196,249	121.3	1,837.1	165,989	128.3	1,553.9	13,158	8.1	123.2	13,158	10.2	123.2	(49,820)	-30.8	-466.4		
		Bonsave	18,466	43,573	27.3	2.3	299,783	573.3	225,395	431.1	259,769	86.7	496.8	196,480	87.2	375.8	57,598	19.2	110.2	57,598	25.6	110.2	(28,683)	-9.6	-54.9		
		Primary	54,791	138,603	26.7	1.7	898,902	540.5	898,902	540.5	813,905	90.5	489.4	813,905	90.5	489.4	174,722	19.4	105.0	174,722	19.4	105.0	(89,726)	-10.0	-53.9		
		Standard	177,654	427,553	31.7	5.1	4,707,838	917.6	4,707,838	917.6	4,350,010	92.4	847.8	4,350,010	92.4	847.8	587,910	12.5	114.6	587,910	12.5	114.6	(230,082)	-4.9	-44.8		
		Consolidated	279,546	650,846	30.6	4.2	6,193,402	793.0	6,086,595	779.3	5,742,578	92.7	735.3	5,649,029	92.8	723.3	889,000	14.4	113.8	889,000	14.6	113.8	(451,435)	-7.3	-57.8	35.7	
1034	Cape Medical Plan	Healthpact Gold	464	866	53.4	39.4	21,237	2,043.6	16,990	1,635.0	22,432	105.6	2,158.6	18,131	106.7	1,744.7	1,156	5.4	111.3	1,156	6.8	111.3	(2,297)	-10.8	-221.1		
		Healthpact Premium	2,415	5,271	34.0	9.3	30,689	485.2	30,689	485.2	28,590	93.2	452.0	28,590	93.2	452.0	5,885	19.2	93.0	5,885	19.2	93.0	(3,786)	-12.3	-59.9		
		Healthpact Silver	3,921	9,106	32.4	7.1	69,871	639.4	55,136	504.6	68,817	98.5	629.8	54,315	98.5	497.1	9,589	13.7	87.8	9,589	17.4	87.8	(8,769)	-12.5	-80.2		
		Consolidated	6,800	15,243	34.1	9.7	121,796	665.9	102,815	562.1	119,839	98.4	655.2	101,036	98.3	552.4	16,631	13.7	90.9	16,631	16.2	90.9	(14,852)	-12.2	-81.2	129.8	
1552	Community Medical Aid Scheme (COMMED)	Core	551	1,059	35.0	8.3	5,470	430.4	5,470	430.4	5,481	100.2	431.3	5,481	100.2	431.3	2,066	37.8	162.6	2,066	37.8	162.6	(2,077)	-38.0	-163.5		
		Deluxe	4,222	8,901	42.2	17.8	154,552	1,447.0	154,552	1,447.0	158,336	102.4	1,482.4	158,336	102.4	1,482.4	22,778	14.7	213.3	22,778	14.7	213.3	(26,562)	-17.2	-248.7		
		Standard	8,096	20,306	32.5	5.8	216,563	888.7	216,563	888.7	182,333	84.2	748.3	182,333	84.2	748.3	45,157	20.9	185.3	45,157	20.9	185.3	(10,927)	-5.0	-44.8		
		Consolidated	12,869	30,266	35.5	9.4	376,585	1,036.9	376,585	1,036.9	346,150	91.9	953.1	346,150	91.9	953.1	70,001	18.6	192.7	70,001	18.6	192.7	(39,566)	-10.5	-108.9	19.7	
1491	Compicare Wellness Medical Scheme	Accolade	1,182	2,546	48.2	21.1	65,128	2,131.7	65,128	2,131.7	64,998	99.8	2,127.5	64,998	99.8	2,127.5	6,671	10.2	218.3	6,671	10.2	218.3	(6,541)	-10.0	-214.1		
		Axis	835	1,670	42.6	14.0	14,742	735.6	14,742	735.6	16,464	111.7	821.6	16,464	111.7	821.6	4,230	28.7	211.1	4,230	28.7	211.1	(5,952)	-40.4	-297.0		
		Dynamix	2,307	5,031	42.4	18.0	87,681	1,452.3	65,817	1,090.2	96,029	109.5	1,590.6	77,055	117.1	1,276.3	12,203	13.9	202.1	12,203	18.5	202.1	(23,441)	-26.7	-388.3		
		Pinnacle	762	1,776	41.2	11.0	42,934	2,014.6	32,173	1,509.6	40,385	94.1	1,894.9	32,351	100.6	1,518.0	4,120	9.6	193.3	4,120	12.8	193.3	(4,299)	-10.0	-201.7		
		Mumed	3,460	8,436	29.6	4.6	76,150	752.2	76,150	752.2	71,633	94.1	707.6	71,633	94.1	707.6	17,343	22.8	171.3	17,343	22.8	171.3	(12,826)	-16.8	-126.7		
		Networx	62	98	34.4	11.2	933	793.0	933	793.0	1,181	126.6	1,004.1	1,181	126.6	1,004.1	289	30.9	245.3	289	30.9	245.3	(537)	-57.6	-456.4		
		Symmetry	4,745	11,030	36.9	11.3	150,272	1,135.3	150,272	1,135.3	159,542	106.2	1,205.4	159,542	106.2	1,205.4	24,817	16.5	187.5	24,817	16.5	187.5	(34,087)	-22.7	-257.5		
		Other*					(425)	-	(425)	-	(591)	139.0	-	(591)	139.0	-	(766)	180.3	-	(766)	180.3	-	932	-219.4	-		
		Consolidated	13,353	30,587	37.3	11.5	437,415	1,191.7	404,789	1,102.8	449,641	102.8	1,225.0	422,633	104.4	1,151.5	68,907	15.8	187.7	68,907	17.0	187.7	(86,751)	-19.8	-236.3	27.9	
1125		Discovery Health	Classic Comprehensive	179,405	437,767	35.1	8.7	8,384,443	1,596.1	6,298,291	1,198.9	8,069,972	96.2	1,536.2	6,022,200	95.6	1,146.4	837,820	10.0	159.5	837,820	13.3	159.5	(561,729)	-6.7	-106.9	
	Medical Scheme	Classic Core	47,743	102,903	34.7	8.2	927,923	751.5	927,988	751.5	566,044	61.0	458.4	564,691	60.9	457.3	197,910	21.3	160.3	197,910	21.3	160.3	165,387	17.8	133.9		

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

		Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
		As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm	R'000	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	2009 %	
Ref no.	Name of medical scheme	Name of benefit option																								
Registered schemes:																										
open continued																										
1125	Discovery Health	Classic Priority	82,754	190,765	31.7	5.2	2,493,273	1,089.2	1,873,326	818.3	2,016,375	80.9	880.8	1,418,048	75.7	619.5	364,859	14.6	159.4	364,859	19.5	159.4	90,419	3.6	39.5	
	Medical Scheme continued	Classic Saver	141,216	307,353	29.4	3.9	3,502,018	949.5	2,633,017	713.9	2,512,024	71.7	681.1	1,749,458	66.4	474.3	598,765	17.1	162.3	598,765	22.7	162.3	284,794	8.1	77.2	
		Coastal Core	65,499	145,034	33.7	7.1	938,247	539.1	938,307	539.1	645,761	68.8	371.0	644,890	68.7	370.5	263,642	28.1	151.5	263,642	28.1	151.5	29,775	3.2	17.1	
		Coastal Saver	128,574	302,014	30.0	3.9	2,663,298	734.9	2,004,235	553.0	2,050,891	77.0	565.9	1,451,817	72.4	400.6	557,124	20.9	153.7	557,124	27.8	153.7	(4,707)	-0.2	-1.3	
		Essential Comprehensive	35,906	80,419	36.7	12.1	1,326,341	1,374.4	1,128,497	1,169.4	1,036,479	78.1	1,074.0	825,486	73.1	855.4	163,987	12.4	169.9	163,987	14.5	169.9	139,024	10.5	144.1	
		Essential Core	17,974	39,523	33.0	7.2	292,478	616.7	292,498	616.7	189,222	64.7	399.0	184,702	63.1	389.4	72,353	24.7	152.6	72,353	24.7	152.6	35,443	12.1	74.7	
		Essential Priority	10,135	21,899	31.0	6.5	247,660	942.4	210,857	802.4	162,999	65.8	620.3	124,149	58.9	472.4	43,669	17.6	166.2	43,669	20.7	166.2	43,040	17.4	163.8	
		Essential Saver	57,639	131,032	28.5	4.1	1,171,333	744.9	997,456	634.4	773,598	66.0	492.0	603,175	60.5	383.6	247,440	21.1	157.4	247,440	24.8	157.4	146,841	12.5	93.4	
		Executive	10,262	24,559	36.9	10.1	582,010	1,974.9	437,782	1,485.5	738,660	126.9	2,506.4	586,065	133.9	1,988.6	46,771	8.0	158.7	46,771	10.7	158.7	(195,053)	-33.5	-661.9	
		Foundation Core	1,200	2,667	37.3	12.2	18,139	566.8	18,139	566.8	12,683	69.9	396.3	12,680	69.9	396.2	5,263	29.0	164.4	5,263	29.0	164.4	197	1.1	6.1	
		KeyCare Core	17,082	28,184	31.4	5.9	140,054	414.1	140,074	414.2	88,462	63.2	261.6	88,458	63.2	261.5	30,427	21.7	90.0	30,427	21.7	90.0	21,189	15.1	62.6	
		KeyCare Plus	122,191	227,789	26.3	2.7	1,153,108	421.8	1,153,290	421.9	984,438	85.4	360.1	984,362	85.4	360.1	268,699	23.3	98.3	268,699	23.3	98.3	(99,771)	-8.7	-36.5	
		Consolidated	917,580	2,041,908	31.6	5.9	23,840,326	973.0	19,053,756	777.6	19,847,609	83.3	810.0	15,260,180	80.1	622.8	3,698,727	15.5	151.0	3,698,727	19.4	151.0	94,849	0.4	3.9	25.5
1202	Fedhealth Medical Scheme	Blue Door	1,637	2,144	23.0	0.2	8,327	323.7	8,327	323.7	4,916	59.0	191.1	4,916	59.0	191.1	4,061	48.8	157.9	4,061	48.8	157.9	(650)	-7.8	-25.3	
		Maxima Basis	13,705	29,996	31.4	3.6	298,494	829.3	298,494	829.3	221,643	74.3	615.8	221,643	74.3	615.8	51,531	17.3	143.2	51,531	17.3	143.2	25,321	8.5	70.3	
		Maxima Core	12,300	25,401	36.9	9.4	205,256	673.4	201,864	662.3	165,664	80.7	543.5	161,442	80.0	529.6	42,353	20.6	138.9	42,353	21.0	138.9	(1,932)	-0.9	-6.3	
		Maxima Plus	1,415	2,654	44.7	15.1	70,233	2,205.3	64,093	2,012.5	82,722	117.8	2,597.4	76,713	119.7	2,408.7	6,113	8.7	192.0	6,113	9.5	192.0	(18,733)	-26.7	-588.2	
		Maxima Standard	42,876	97,925	32.4	3.7	1,180,011	1,004.2	1,054,578	897.4	1,103,519	93.5	939.1	971,770	92.1	827.0	165,214	14.0	140.6	165,214	15.7	140.6	(82,405)	-7.0	-70.1	
		Ultima 200 without OHEB	5,737	12,314	47.5	22.2	142,406	963.7	139,874	946.6	137,904	96.8	933.2	134,618	96.2	911.0	20,606	14.5	139.4	20,606	14.7	139.4	(15,350)	-10.8	-103.9	
		Ultima 200 with OHEB	4,542	8,901	49.0	27.9	145,453	1,361.8	132,662	1,242.0	135,360	93.1	1,267.3	119,853	90.3	1,122.1	16,955	11.7	158.7	16,955	12.8	158.7	(4,147)	-2.9	-38.8	
		Ultima 300	3,140	5,832	53.7	33.9	155,959	2,228.5	144,989	2,071.8	155,650	99.8	2,224.1	141,971	97.9	2,028.6	14,137	9.1	202.0	14,137	9.8	202.0	(11,119)	-7.1	-158.9	
		Ultimax	768	1,279	57.8	41.3	50,874	3,314.7	46,842	3,052.0	58,600	115.2	3,818.1	53,886	115.0	3,510.9	3,571	7.0	232.7	3,571	7.6	232.7	(10,615)	-20.9	-691.6	
		Consolidated	86,120	186,446	35.5	8.1	2,257,014	1,008.8	2,091,724	934.9	2,065,977	91.5	923.4	1,886,812	90.2	843.3	324,542	14.4	145.1	324,542	15.5	145.1	(119,631)	-5.3	-53.5	25.8
1554	Genesis Medical Scheme	Private	3,931	11,632	31.2	5.9	76,401	547.3	76,401	547.3	57,007	74.6	408.4	57,007	74.6	408.4	10,250	13.4	73.4	10,250	13.4	73.4	9,144	12.0	65.5	
		Private Comprehensive	1,300	3,740	29.7	3.4	40,591	904.4	31,530	702.5	36,632	90.2	816.2	28,341	89.9	631.5	5,469	13.5	121.9	5,469	17.3	121.9	(2,281)	-5.6	-50.8	
		Private Plus	1,963	5,518	29.7	3.3	46,022	695.0	39,120	590.8	35,004	76.1	528.6	28,072	71.8	423.9	6,147	13.4	92.8	6,147	15.7	92.8	4,901	10.7	74.0	
		Consolidated	7,194	20,890	30.5	4.8	163,014	650.3	147,051	586.6	128,643	78.9	513.2	113,420	77.1	452.4	21,866	13.4	87.2	21,866	14.9	87.2	11,765	7.2	46.9	106.2
1561	Gen-Health Medical Scheme	Basic Cover Plan	9,171	21,960	35.1	6.4	157,760	598.7	157,760	598.7	148,918	94.4	565.1	148,918	94.4	565.1	28,165	17.9	106.9	28,165	17.9	106.9	(19,323)	-12.2	-73.3	
		Cover Plus Plan	3,026	7,939	38.7	10.3	84,806	890.2	70,800	743.2	107,117	126.3	1,124.4	95,172	134.4	999.0	11,389	13.4	119.6	11,389	16.1	119.6	(35,762)	-42.2	-375.4	
		Primary Cover Plan	380	561	36.4	12.8	2,068	307.2	2,068	307.2	1,830	88.5	271.8	1,830	88.5	271.8	763	36.9	113.3	763	36.9	113.3	(524)	-25.3	-77.9	

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %	
Registered schemes:																											
open continued																											
1561	Gen-Health Medical Scheme continued	Consolidated	12,577	30,460	36.1	7.5	244,634	669.3	230,628	631.0	257,864	105.4	705.5	245,919	106.6	672.8	40,317	16.5	110.3	40,317	17.5	110.3	(55,609)	-22.7	-152.1	21.5	
1466	Good Hope Medical Aid Society	Makoti Comprehensive	1,203	2,820	28.6	0.2	18,888	558.2	18,888	558.2	17,502	92.7	517.2	17,502	92.7	517.2	1,341	7.1	39.6	1,341	7.1	39.6	45	0.2	1.3		
		Makoti Primary	1,879	4,942	29.2	0.4	14,012	236.3	14,012	236.3	12,368	88.3	208.6	12,368	88.3	208.6	1,579	11.3	26.6	1,579	11.3	26.6	64	0.5	1.1		
		Super 100	355	857	38.7	9.3	7,063	686.8	7,063	686.8	7,094	100.4	689.8	7,094	100.4	689.8	2,430	34.4	236.3	2,430	34.4	236.3	(2,461)	-34.8	-239.3		
		Consolidated	3,437	8,619	30.0	1.2	39,962	386.4	39,962	386.4	36,964	92.5	357.4	36,964	92.5	357.4	5,350	13.4	51.7	5,350	13.4	51.7	(2,351)	-5.9	-22.7	110.2	
1537	Hosmed Medical Aid Scheme	Plus	9,718	30,514	29.7	2.2	356,312	973.1	356,312	973.1	312,834	87.8	854.3	312,834	87.8	854.3	55,545	15.6	151.7	55,545	15.6	151.7	(12,066)	-3.4	-33.0		
		Step	6,853	12,539	29.9	1.8	38,181	253.8	38,181	253.8	32,926	86.2	218.8	32,926	86.2	218.8	7,545	19.8	50.1	7,545	19.8	50.1	(2,289)	-6.0	-15.2		
		Value	15,840	48,845	28.7	1.8	441,957	754.0	441,957	754.0	333,272	75.4	568.6	333,272	75.4	568.6	89,979	20.4	153.5	89,979	20.4	153.5	18,706	4.2	31.9		
		Consolidated	32,411	91,898	29.2	2.0	836,451	758.5	836,451	758.5	679,031	81.2	615.7	679,031	81.2	615.7	153,068	18.3	138.8	153,068	18.3	138.8	4,351	0.5	3.9	12.4	
1577	Ingwe Health Plan	Capitation	6,469	10,361	28.6	1.6	94,756	762.1	94,756	762.1	75,271	79.4	605.4	75,271	79.4	605.4	20,869	22.0	167.8	20,869	22.0	167.8	(1,384)	-1.5	-11.1		
		Pioneer	5,163	5,274	24.6	-	20,777	328.3	20,777	328.3	9,292	44.7	146.8	9,292	44.7	146.8	4,645	22.4	73.4	4,645	22.4	73.4	6,840	32.9	108.1		
		Classic	167	348	39.9	8.9	10,364	2,481.8	10,364	2,481.8	11,023	106.4	2,639.6	11,023	106.4	2,639.6	2,267	21.9	542.9	2,267	21.9	542.9	(2,926)	-28.2	-700.7		
		Hospital Plus	760	977	29.3	3.0	6,530	557.0	6,530	557.0	3,292	50.4	280.8	3,292	50.4	280.8	1,450	22.2	123.7	1,450	22.2	123.7	1,788	27.4	152.5		
		Medicare	1,117	2,238	35.2	8.5	22,353	832.3	22,353	832.3	23,690	106.0	882.1	23,690	106.0	882.1	4,881	21.8	181.7	4,881	21.8	181.7	(6,218)	-27.8	-231.5		
		Consolidated	13,676	19,198	28.5	2.1	154,780	671.9	154,780	671.9	122,568	79.2	532.0	122,568	79.2	532.0	34,112	22.0	148.1	34,112	22.0	148.1	(1,900)	-1.2	-8.2	12.0	
1087	Keyhealth	Bronze	1,585	3,811	34.5	9.0	21,507	470.3	21,507	470.3	24,331	113.1	532.0	24,331	113.1	532.0	6,214	28.9	135.9	6,214	28.9	135.9	(9,038)	-42.0	-197.6		
		Gold	26,826	64,023	39.3	13.7	922,913	1,201.3	865,155	1,126.1	834,843	90.5	1,086.6	782,022	90.4	1,017.9	121,958	13.2	158.7	121,958	14.1	158.7	(38,825)	-4.2	-50.5		
		Keycap	1,012	1,871	46.2	22.2	15,417	686.7	15,417	686.7	20,251	131.4	902.0	20,251	131.4	902.0	3,874	25.1	172.5	3,874	25.1	172.5	(8,708)	-56.5	-387.8		
		Platinum	7,272	13,802	50.8	29.1	356,901	2,154.9	356,901	2,154.9	359,377	100.7	2,169.8	359,377	100.7	2,169.8	32,209	9.0	194.5	32,209	9.0	194.5	(34,685)	-9.7	-209.4		
		Silver	7,706	19,028	35.4	9.9	199,751	874.8	199,751	874.8	178,131	89.2	780.1	178,131	89.2	780.1	35,071	17.6	153.6	35,071	17.6	153.6	(13,451)	-6.7	-58.9		
		Consolidated	44,401	102,535	40.1	15.0	1,516,489	1,232.5	1,458,731	1,185.6	1,416,933	93.4	1,151.6	1,364,112	93.5	1,108.7	199,326	13.1	162.0	199,326	13.7	162.0	(104,707)	-6.9	-85.1	14.7	
1576	Liberty Health	Gold Complete	2,385	5,578	37.0	11.7	95,364	1,424.7	81,197	1,213.1	83,960	88.0	1,254.3	70,930	87.4	1,059.7	9,994	10.5	149.3	9,994	12.3	149.3	273	0.3	4.1		
		Gold Focus	8,589	18,255	37.0	10.1	151,272	690.5	151,430	691.3	124,971	82.6	570.5	124,818	82.4	569.8	33,667	22.3	153.7	33,667	22.2	153.7	(7,055)	-4.7	-32.2		
		Gold Plus	6,217	13,790	32.1	6.5	132,324	799.6	112,582	680.3	103,281	78.1	624.1	84,628	75.2	511.4	24,220	18.3	146.4	24,220	21.5	146.4	3,734	2.8	22.6		
		Platinum Complete	7,971	18,552	40.5	15.5	361,501	1,623.8	307,695	1,382.1	351,476	97.2	1,578.8	301,687	98.0	1,355.1	33,465	9.3	150.3	33,465	10.9	150.3	(27,456)	-7.6	-123.3		
		Platinum Focus	9,205	20,042	40.8	14.7	215,248	895.0	215,466	895.9	203,343	94.5	845.5	203,186	94.3	844.8	37,428	17.4	155.6	37,428	17.4	155.6	(25,148)	-11.7	-104.6		
		Platinum Plus	1,866	3,963	33.9	6.8	46,542	978.7	41,998	883.1	42,019	90.3	883.6	37,785	90.0	794.5	7,346	15.8	154.5	7,346	17.5	154.5	(3,133)	-6.7	-65.9		
		Silver Corporate Network	6,631	11,166	30.3	2.8	45,269	337.8	45,321	338.2	39,284	86.8	293.2	39,265	86.6	293.0	7,932	17.5	59.2	7,932	17.5	59.2	(1,876)	-4.1	-14.0		
		Silver Focus	2,121	3,827	35.9	12.7	25,543	556.2	25,559	556.6	24,386	95.5	531.0	24,378	95.4	530.8	6,749	26.4	147.0	6,749	26.4	147.0	(5,567)	-21.8	-121.2		
		Consolidated	44,985	95,173	36.8	10.8	1,073,064	939.6	981,249	859.2	972,720	90.6	851.7	886,677	90.4	776.4	160,800	15.0	140.8	160,800	16.4	140.8	(66,229)	-6.2	-58.0	19.5	



## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

		Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
Ref no.	Name of medical scheme	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %	
Registered schemes:																										
open continued																										
1549	Medicover	Alta	4,228	9,309	38.4	15.4	130,967	1,172.4	104,721	937.5	181,623	138.7	1,625.9	161,003	153.7	1,441.3	14,688	11.2	131.5	14,688	14.0	131.5	(70,970)	-54.2	-635.3	
		Bona Plus	10,231	25,553	28.9	4.5	217,132	708.1	217,656	709.8	217,138	100.0	708.1	217,138	99.8	708.1	40,407	18.6	131.8	40,407	18.6	131.8	(39,889)	-18.4	-130.1	
		Titan	23,309	57,123	29.3	3.0	647,320	944.3	549,769	802.0	526,647	81.4	768.3	406,609	74.0	593.2	87,414	13.5	127.5	87,414	15.9	127.5	55,746	8.6	81.3	
		Consolidated	37,768	91,985	30.1	4.6	995,419	901.8	872,146	790.1	925,408	93.0	838.4	784,750	90.0	710.9	142,509	14.3	129.1	142,509	16.3	129.1	(55,113)	-5.5	-49.9	39.2
1149	Medihelp	Dimension Elite	28,928	55,925	45.9	21.9	861,352	1,283.5	861,352	1,283.5	842,420	97.8	1,255.3	842,420	97.8	1,255.3	96,733	11.2	144.1	96,733	11.2	144.1	(77,800)	-9.0	-115.9	
		Dimension Prime 1	8,582	19,755	34.3	8.5	106,536	449.4	106,536	449.4	88,606	83.2	373.8	88,606	83.2	373.8	12,027	11.3	50.7	12,027	11.3	50.7	5,903	5.5	24.9	
		Dimension Prime 2	10,691	24,900	34.8	11.1	201,719	675.1	162,559	544.0	191,600	95.0	641.2	157,625	97.0	527.5	18,429	9.1	61.7	18,429	11.3	61.7	(13,495)	-6.7	-45.2	
		Dimension Prime 3	18,538	46,043	32.6	6.8	419,664	759.6	419,664	759.6	377,417	89.9	683.1	377,417	89.9	683.1	47,356	11.3	85.7	47,356	11.3	85.7	(5,109)	-1.2	-9.2	
		Medihelp Plus	31,432	42,060	68.7	68.7	1,460,271	2,893.2	1,460,271	2,893.2	1,378,596	94.4	2,731.4	1,378,596	94.4	2,731.4	163,255	11.2	323.5	163,255	11.2	323.5	(81,580)	-5.6	-161.6	
		Necesse	11,360	20,940	29.8	3.5	92,039	366.3	92,039	366.3	93,039	101.1	370.3	93,039	101.1	370.3	10,523	11.4	41.9	10,523	11.4	41.9	(11,523)	-12.5	-45.9	
		Unify	3,147	10,617	25.4	1.9	79,639	625.1	79,639	625.1	73,223	91.9	574.7	73,223	91.9	574.7	9,012	11.3	70.7	9,012	11.3	70.7	(2,596)	-3.3	-20.4	
		Consolidated	112,678	220,240	42.7	22.5	3,221,220	1,218.8	3,182,060	1,204.0	3,044,901	94.5	1,152.1	3,010,926	94.6	1,139.3	357,336	11.1	135.2	357,336	11.2	135.2	(186,201)	-5.8	-70.5	31.5
1506	Medimed Medical Scheme	Alpha	1,364	3,608	28.5	3.2	20,201	466.6	20,201	466.6	16,572	82.0	382.8	16,572	82.0	382.8	1,822	9.0	42.1	1,822	9.0	42.1	1,807	8.9	41.7	
		Managed Care	983	2,705	26.9	2.3	20,750	639.2	20,750	639.2	18,326	88.3	564.6	18,326	88.3	564.6	1,515	7.3	46.7	1,515	7.3	46.7	908	4.4	28.0	
		Medisave - Max	315	788	38.0	9.7	11,853	1,253.5	8,947	946.2	13,499	113.9	1,427.6	11,013	123.1	1,164.7	463	3.9	49.0	463	5.2	49.0	(2,529)	-21.3	-267.5	
		Medisave - Standard	1,574	4,010	28.4	3.1	38,790	806.1	29,141	605.6	30,915	79.7	642.5	22,261	76.4	462.6	3,026	7.8	62.9	3,026	10.4	62.9	3,854	9.9	80.1	
		Consolidated	4,236	11,111	28.7	3.4	91,593	687.0	79,039	592.8	79,312	86.6	594.8	68,171	86.3	511.3	6,827	7.5	51.2	6,827	8.6	51.2	4,040	4.4	30.3	99.6
1140	Medshield Medical Scheme	HospiPlan	1,439	2,795	43.8	19.0	20,894	622.9	20,894	622.9	25,635	122.7	764.3	25,635	122.7	764.3	5,038	24.1	150.2	5,038	24.1	150.2	(9,780)	-46.8	-291.6	
		MediBonus	11,312	23,793	35.9	6.6	338,873	1,186.9	338,873	1,186.9	328,677	97.0	1,151.2	328,677	97.0	1,151.2	39,606	11.7	138.7	39,606	11.7	138.7	(29,411)	-8.7	-103.0	
		MediPlus	43,263	110,256	29.6	2.3	912,758	689.9	912,758	689.9	818,544	89.7	618.7	818,544	89.7	618.7	151,474	16.6	114.5	151,474	16.6	114.5	(57,260)	-6.3	-43.3	
		MediValue	17,017	36,794	30.5	3.3	220,973	500.5	220,973	500.5	202,562	91.7	458.8	202,562	91.7	458.8	59,581	27.0	134.9	59,581	27.0	134.9	(41,169)	-18.6	-93.2	
		Consolidated	73,031	173,638	30.9	3.4	1,493,498	716.8	1,493,498	716.8	1,375,418	92.1	660.1	1,375,418	92.1	660.1	255,699	17.1	122.7	255,699	17.1	122.7	(137,619)	-9.2	-66.0	52.0
1167	Momentum Health	Access	2,514	4,834	28.4	4.0	37,154	640.5	37,154	640.5	28,168	75.8	485.6	28,069	75.5	483.9	5,081	13.7	87.6	5,081	13.7	87.6	4,004	10.8	69.0	
		Base Carecross & Hospital Network	34	46	22.7	-	29	52.5	29	52.5	16	55.2	29.0	16	55.2	29.0	5	17.2	9.1	5	17.2	9.1	8	27.6	14.5	
		Base Carecross & State Hospital	55	55	41.4	-	44	66.7	44	66.7	19	43.2	28.8	19	43.2	28.8	13	29.5	19.7	13	29.5	19.7	12	27.3	18.2	
		Base Faranani & Hospital Network	246	493	25.8	0.8	2,961	500.5	2,961	500.5	1,765	59.6	298.3	1,765	59.6	298.3	289	9.8	48.9	289	9.8	48.9	907	30.6	153.3	
		Base Faranani & State Hospital	87	134	27.3	0.8	572	355.7	572	355.7	316	55.2	196.5	316	55.2	196.5	96	16.8	59.7	96	16.8	59.7	160	28.0	99.5	

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio
			As at:	As at:	Years	%	R'000	pbpm	R'000	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	2009
Ref no.	Name of medical scheme	Name of benefit option	31.12.2009	31.12.2009				R		R			R			R			R			R				%
Registered schemes: open continued																										
1167	Momentum Health continued	Base Primecure & Hospital Network	1,676	3,094	30.0	5.1	20,513	552.5	20,513	552.5	16,913	82.5	455.5	16,882	82.3	454.7	2,071	10.1	55.8	2,071	10.1	55.8	1,560	7.6	42.0	
		Base Primecure & State Hospital	2,321	2,537	32.6	0.3	10,280	337.7	10,280	337.7	4,305	41.9	141.4	4,302	41.8	141.3	2,149	20.9	70.6	2,149	20.9	70.6	3,829	37.2	125.8	
		Custom Any GP/ Phar- macy & Any Hospital	2,297	5,108	34.0	9.5	42,513	693.6	39,448	643.6	34,627	81.5	564.9	31,194	79.1	508.9	6,621	15.6	108.0	6,621	16.8	108.0	1,633	3.8	26.6	
		Custom Any GP/ Pharmacy & Associated Hospital	9,595	22,784	29.0	2.3	164,434	601.4	152,399	557.4	139,640	84.9	510.7	126,150	82.8	461.4	29,709	18.1	108.7	29,709	19.5	108.7	(3,460)	-2.1	-12.7	
		Custom Associated GP/ Pharmacy & Any Hospital	162	374	30.5	2.7	2,629	585.8	2,440	543.7	2,619	99.6	583.6	2,438	99.9	543.2	404	15.4	90.0	404	16.6	90.0	(402)	-15.3	-89.6	
		Custom Associated GP/ Pharmacy & Associated Hospital	971	2,217	31.3	5.2	11,294	424.5	10,476	393.8	6,920	61.3	260.1	6,166	58.9	231.8	2,139	18.9	80.4	2,139	20.4	80.4	2,171	19.2	81.6	
		Custom State & Any Hospital	2,586	5,924	27.8	2.6	47,206	664.1	43,801	616.2	31,763	67.3	446.8	28,108	64.2	395.4	7,706	16.3	108.4	7,706	17.6	108.4	7,987	16.9	112.4	
		Custom State & Associated Hospital	9,127	20,197	27.9	2.2	122,938	507.2	114,063	470.6	82,519	67.1	340.5	73,920	64.8	305.0	25,588	20.8	105.6	25,588	22.4	105.6	14,555	11.8	60.1	
		Extender Any GP/ Pharmacy & Any Hospital	5,927	13,230	42.3	16.8	257,269	1,620.5	193,941	1,221.6	287,149	111.6	1,808.7	223,555	115.3	1,408.1	29,312	11.4	184.6	29,312	15.1	184.6	(58,926)	-22.9	-371.2	
		Extender Any GP/ Pharmacy & Any Associated Hospital	165	429	35.1	9.6	62,902	12,218.7	47,419	9,211.1	65,057	103.4	12,637.3	49,708	104.8	9,655.8	8,324	13.2	1,616.9	8,324	17.6	1,616.9	(10,613)	-16.9	-2,061.6	
		Extender Associated GP/ Pharmacy & Any Hospital	1,608	3,561	40.1	12.9	5,723	133.9	4,314	101.0	5,983	104.5	140.0	4,712	109.2	110.3	590	10.3	13.8	590	13.7	13.8	(988)	-17.3	-23.1	
		Extender Associated GP/ Pharmacy & Associated Hospital	279	682	37.2	12.9	10,187	1,244.7	7,690	939.6	9,418	92.5	1,150.8	7,099	92.3	867.4	1,347	13.2	164.6	1,347	17.5	164.6	(756)	-7.4	-92.4	
		Extender State & Any Hospital	3,150	7,780	29.4	3.4	126,200	1,351.8	95,104	1,018.7	90,542	71.7	969.8	59,875	63.0	641.3	15,961	12.6	171.0	15,961	16.8	171.0	19,268	15.3	206.4	
Extender State & Associated Hospital	1,223	3,207	29.3	2.5	46,540	1,209.3	35,106	912.2	35,459	76.2	921.4	23,841	67.9	619.5	6,534	14.0	169.8	6,534	18.6	169.8	4,731	10.2	122.9			

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
Ref.no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %	
Registered schemes:																											
open continued																											
1167	Momentum Health continued	Incentive Any GP/ Pharmacy & Any Hospital	12,248	26,644	40.7	16.3	289,993	907.0	261,723	818.6	300,425	103.6	939.6	268,540	102.6	839.9	46,908	16.2	146.7	46,908	17.9	146.7	(53,725)	-18.5	-168.0		
		Incentive Any GP/ Pharmacy & Associated Hospital	2,518	5,958	35.5	9.2	59,636	834.1	53,865	753.4	55,917	93.8	782.1	49,616	92.1	694.0	10,134	17.0	141.7	10,134	18.8	141.7	(5,885)	-9.9	-82.3		
		Incentive Associated GP/Pharmacy & Any Hospital	338	779	34.8	8.3	7,207	771.0	6,511	696.5	5,977	82.9	639.4	5,234	80.4	559.9	1,148	15.9	122.8	1,148	17.6	122.8	129	1.8	13.8		
		Incentive Associated GP/Pharmacy & Associated Hospital	794	1,819	34.4	7.2	14,649	671.1	13,235	606.3	10,761	73.5	493.0	9,366	70.8	429.1	2,540	17.3	116.4	2,540	19.2	116.4	1,329	9.1	60.9		
		Incentive State & Any Hospital	10,641	24,626	30.2	4.5	251,739	851.9	227,209	768.9	187,527	74.5	634.6	160,382	70.6	542.7	43,004	17.1	145.5	43,004	18.9	145.5	23,823	9.5	80.6		
		Incentive State & Associated Hospital	8,923	19,709	30.4	4.2	175,959	744.0	158,935	672.0	129,993	73.9	549.6	111,710	70.3	472.3	35,343	20.1	149.4	35,343	22.2	149.4	11,882	6.8	50.2		
		Summit	2,160	4,131	52.0	32.8	125,356	2,528.8	125,356	2,528.8	148,377	118.4	2,993.2	147,595	117.7	2,977.4	12,282	9.8	247.8	12,282	9.8	247.8	(34,521)	-27.5	-696.4		
		Consolidated	81,645	180,352	33.2	7.6	1,895,927	876.0	1,664,588	769.1	1,682,175	88.7	777.3	1,440,578	86.5	665.6	295,298	15.6	136.4	295,298	17.7	136.4	(71,288)	-3.8	-32.9	15.8	
1166	National Independent	Classic	7,265	16,227	34.0	7.3	154,018	791.0	154,018	791.0	137,050	89.0	703.8	137,050	89.0	703.8	21,365	13.9	109.7	21,365	13.9	109.7	(4,397)	-2.9	-22.6		
	Medical Aid Society (NIMAS)	Millenium	4,688	10,181	44.1	20.3	143,153	1,171.7	114,986	941.2	137,188	95.8	1,122.9	107,893	93.8	883.1	13,965	9.8	114.3	13,965	12.1	114.3	(6,871)	-4.8	-56.2		
		Supreme	561	1,171	47.6	28.4	31,228	2,222.3	31,228	2,222.3	29,447	94.3	2,095.6	29,447	94.3	2,095.6	1,644	5.3	117.0	1,644	5.3	117.0	137	0.4	9.8		
		Primary	1,327	2,161	34.0	11.9	14,997	578.3	14,997	578.3	12,495	83.3	481.9	12,495	83.3	481.9	2,063	13.8	79.5	2,063	13.8	79.5	439	2.9	16.9		
		Consolidated	13,841	29,740	38.0	12.9	343,395	962.2	315,229	883.3	316,180	92.1	886.0	286,885	91.0	803.9	39,036	11.4	109.4	39,036	12.4	109.4	(10,692)	-3.1	-30.0	13.0	
1215	Oxygen Medical Scheme	80% Plan	9,086	19,579	43.2	22.3	133,886	569.9	133,886	569.9	124,015	92.6	527.8	123,730	92.4	526.6	16,489	12.3	70.2	16,489	12.3	70.2	(6,333)	-4.7	-27.0		
		Core Plus	16,981	43,376	36.4	12.6	379,326	728.8	379,332	728.8	332,412	87.6	638.6	329,935	87.0	633.9	64,292	16.9	123.5	64,292	16.9	123.5	(14,895)	-3.9	-28.6		
		Elite Plus	-	-	-	-	104,212	-	96,435	-	112,369	107.8	-	103,057	106.9	-	9,124	8.8	-	9,124	9.5	-	(15,745)	-15.1	-		
		Essential	2,733	4,475	40.2	20.0	39,215	730.3	39,216	730.3	27,336	69.7	509.0	26,842	68.4	499.9	11,891	30.3	221.4	11,891	30.3	221.4	483	1.2	9.0		
		Essential Carecross	3,794	6,475	38.8	18.5	55,564	715.1	55,564	715.1	45,969	82.7	591.6	45,694	82.2	588.1	27,619	49.7	355.5	27,619	49.7	355.5	(17,749)	-31.9	-228.4		
		Premium Plus	6,759	14,744	38.3	15.8	90,608	512.1	66,934	378.3	88,525	97.7	500.3	72,908	108.9	412.1	8,987	9.9	50.8	8,987	13.4	50.8	(14,961)	-16.5	-84.6		
		Progressive	1,990	3,425	43.7	24.9	42,174	1,026.1	42,174	1,026.1	42,697	101.2	1,038.8	41,932	99.4	1,020.2	11,628	27.6	282.9	11,628	27.6	282.9	(11,386)	-27.0	-277.0		
		Standard	17,134	41,786	33.8	9.9	410,049	817.8	380,763	759.4	350,662	85.5	699.3	320,319	84.1	638.8	65,322	15.9	130.3	65,322	17.2	130.3	(4,878)	-1.2	-9.7		
		Standard Plus	-	-	-	-	269,943	-	250,555	-	276,686	102.5	-	252,266	100.7	-	31,662	11.7	-	31,662	12.6	-	(33,373)	-12.4	-		
		Other*					747	-	734	-	(770)	-103.1	-	(799)	-108.8	-	13	1.7	-	13	1.7	-	1,520	203.5	-		

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %
Registered schemes:																										
open continued																										
1215	Oxygen Medical Scheme	Consolidated	58,477	133,860	37.2	14.4	1,525,723	949.8	1,445,593	899.9	1,399,900	91.8	871.5	1,315,884	91.0	819.2	247,025	16.2	153.8	247,025	17.1	153.8	(117,316)	-7.7	-73.0	11.2
1546	Pharos Medical Plan	continued																								
		Footprint	749	1,639	28.1	3.6	15,264	776.1	15,264	776.1	9,943	65.1	505.5	9,826	64.4	499.6	4,170	27.3	212.0	4,170	27.3	212.0	1,267	8.3	64.4	
		Comprehensive																								
		Footprint Primary	557	995	32.7	7.2	5,158	432.0	5,158	432.0	2,931	56.8	245.5	2,931	56.8	245.5	2,216	43.0	185.6	2,216	43.0	185.6	10	0.2	0.9	
		Methcare	1,120	2,655	40.1	18.6	17,506	549.5	17,506	549.5	10,600	60.6	332.7	10,600	60.6	332.7	3,565	20.4	111.9	3,565	20.4	111.9	3,341	19.1	104.9	
		Paladin Comprehensive	1,736	4,312	32.2	5.9	59,508	1,150.0	59,508	1,150.0	46,643	78.4	901.4	46,566	78.3	899.9	10,340	17.4	199.8	10,340	17.4	199.8	2,603	4.4	50.3	
		Rainbow Comprehensive	1,557	3,590	39.4	11.9	80,016	1,857.4	80,016	1,857.4	72,821	91.0	1,690.4	72,681	90.8	1,687.1	9,193	11.5	213.4	9,193	11.5	213.4	(1,858)	-2.3	-43.1	
		Rainbow Plus	1,035	2,515	29.2	4.1	23,835	789.8	19,852	657.8	16,033	67.3	531.3	12,235	61.6	405.4	5,711	24.0	189.2	5,711	28.8	189.2	1,907	8.0	63.2	
		Rainbow Primary	418	953	38.7	12.6	7,894	690.3	7,894	690.3	6,834	86.6	597.6	6,834	86.6	597.6	2,063	26.1	180.4	2,063	26.1	180.4	(1,003)	-12.7	-87.7	
Consolidated	7,172	16,659	34.5	9.2	209,181	1,046.4	205,198	1,026.5	165,807	79.3	829.4	161,674	78.8	808.7	37,258	17.8	186.4	37,258	18.2	186.4	6,267	3.0	31.3	21.2		
1454	Pro Sano Medical Scheme	ProCedure	4,059	6,288	33.0	4.5	24,469	324.3	24,469	324.3	27,035	110.5	358.3	27,035	110.5	358.3	5,473	22.4	72.5	5,473	22.4	72.5	(8,039)	-32.9	-106.5	
		ProClassic	23,274	53,570	39.2	13.4	677,552	1,054.0	557,183	866.8	685,093	101.1	1,065.7	564,849	101.4	878.7	79,889	11.8	124.3	79,889	14.3	124.3	(87,555)	-12.9	-136.2	
		ProElite	483	1,146	32.8	5.4	17,219	1,252.1	13,744	999.4	18,217	105.8	1,324.7	15,943	116.0	1,159.3	1,849	10.7	134.4	1,849	13.4	134.4	(4,048)	-23.5	-294.3	
		ProVider	3,518	8,536	33.9	8.6	60,527	590.9	60,527	590.9	59,531	98.4	581.2	59,531	98.4	581.2	10,552	17.4	103.0	10,552	17.4	103.0	(9,556)	-15.8	-93.3	
		ProVision	249	523	34.6	8.0	3,730	594.4	3,730	594.4	2,209	59.2	352.0	2,209	59.2	352.0	688	18.4	109.6	688	18.4	109.6	834	22.3	132.8	
		Consolidated	31,583	70,063	37.8	11.9	783,496	931.9	659,653	784.6	792,085	101.1	942.1	669,568	101.5	796.4	98,450	12.6	117.1	98,450	14.9	117.1	(108,365)	-13.8	-128.9	28.1
1196	Protea Medical Aid Society	Extended Plan	190	279	71.0	69.5	10,568	3,156.6	10,568	3,156.6	14,405	136.3	4,302.5	14,405	136.3	4,302.5	1,671	15.8	499.1	1,671	15.8	499.1	(5,507)	-52.1	-1,645.0	
		Standard Plan	765	1,271	58.0	46.5	21,807	1,429.8	21,807	1,429.8	24,091	110.5	1,579.5	24,091	110.5	1,579.5	3,585	16.4	235.1	3,585	16.4	235.1	(5,870)	-26.9	-384.8	
		Essential Plan	5,242	5,596	24.3	0.3	15,886	236.6	15,886	236.6	11,409	71.8	169.9	11,409	71.8	169.9	4,475	28.2	66.6	4,475	28.2	66.6	1	-	-	
		Consolidated	6,197	7,146	32.1	11.2	48,261	562.8	48,261	562.8	49,906	103.4	582.0	49,906	103.4	582.0	9,731	20.2	113.5	9,731	20.2	113.5	(11,376)	-23.6	-132.7	19.0
1170	Purehealth Medical Scheme	NBC Famplus	1,084	2,403	43.6	20.9	52,101	1,806.8	52,101	1,806.8	44,000	84.5	1,525.9	44,000	84.5	1,525.9	5,758	11.1	199.7	5,758	11.1	199.7	2,343	4.5	81.3	
		Network	731	1,270	43.3	26.1	12,020	788.7	12,020	788.7	14,118	117.5	926.4	14,118	117.5	926.4	1,267	10.5	83.1	1,267	10.5	83.1	(3,365)	-28.0	-220.8	
		NBC Savemed	896	1,880	42.0	20.2	33,732	1,495.2	26,867	1,190.9	30,986	91.9	1,373.5	24,867	92.6	1,102.3	3,940	11.7	174.6	3,940	14.7	174.6	(1,940)	-5.8	-86.0	
		NBC Topcare	507	1,078	48.9	26.4	36,831	2,847.2	36,831	2,847.2	33,421	90.7	2,583.6	33,421	90.7	2,583.6	3,500	9.5	270.6	3,500	9.5	270.6	(90)	-0.2	-7.0	
		Consolidated	3,218	6,631	44.0	22.6	134,685	1,692.6	127,819	1,606.3	122,525	91.0	1,539.8	116,406	91.1	1,462.9	14,465	10.7	181.8	14,465	11.3	181.8	(3,051)	-2.3	-38.3	7.6
1575	Resolution Health Medical Scheme	Fundamental	4,829	9,549	28.0	1.1	45,362	395.9	45,362	395.9	40,486	89.3	353.3	40,486	89.3	353.3	22,216	49.0	193.9	22,216	49.0	193.9	(17,340)	-38.2	-151.3	
		Hospital	6,633	15,561	30.5	2.9	82,207	440.2	82,207	440.2	54,702	66.5	292.9	54,702	66.5	292.9	28,277	34.4	151.4	28,277	34.4	151.4	(771)	-0.9	-4.1	
		Prestige	7,967	17,102	32.7	4.0	235,133	1,145.7	235,133	1,145.7	190,603	81.1	928.8	190,603	81.1	928.8	39,941	17.0	194.6	39,941	17.0	194.6	4,589	2.0	22.4	
		Progressive	13,682	32,000	28.9	1.4	254,757	663.4	239,655	624.1	192,264	75.5	500.7	178,658	74.5	465.3	67,228	26.4	175.1	67,228	28.1	175.1	(6,231)	-2.4	-16.2	
		Consolidated	33,111	74,212	30.0	2.3	617,459	693.4	602,357	676.4	478,055	77.4	536.8	464,449	77.1	521.5	157,661	25.5	177.0	157,661	26.2	177.0	(19,753)	-3.2	-22.2	16.0

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

		Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio		
		As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %		
Registered schemes:																											
open continued																											
1446	Selfmed Medical Scheme	Medxoi	5,114	11,325	42.3	17.7	99,276	730.5	99,276	730.5	85,614	86.2	630.0	85,614	86.2	630.0	19,459	19.6	143.2	19,459	19.6	143.2	(5,797)	-5.8	-42.7		
		Medxoi Chronic	449	708	59.3	49.2	16,935	1,993.3	16,935	1,993.3	17,676	104.4	2,080.5	17,676	104.4	2,080.5	1,867	11.0	219.8	1,867	11.0	219.8	(2,608)	-15.4	-307.0		
		Medxoi Comprehensive	1,074	2,276	48.1	27.2	29,615	1,084.3	29,615	1,084.3	36,195	122.2	1,325.3	36,195	122.2	1,325.3	4,008	13.5	146.8	4,008	13.5	146.8	(10,589)	-35.8	-387.7		
		Selfmed 80%	942	1,602	57.0	44.4	55,550	2,889.6	55,550	2,889.6	47,505	85.5	2,471.1	47,505	85.5	2,471.1	3,572	6.4	185.8	3,572	6.4	185.8	4,473	8.1	232.7		
		Selfsure	3,674	7,728	33.7	9.5	89,880	969.2	89,880	969.2	75,370	83.9	812.7	75,370	83.9	812.7	14,437	16.1	155.7	14,437	16.1	155.7	73	0.1	0.8		
		Consolidated	11,253	23,639	41.5	18.7	291,256	1,026.8	291,256	1,026.8	262,361	90.1	924.9	262,361	90.1	924.9	43,344	14.9	152.8	43,344	14.9	152.8	(14,448)	-5.0	-50.9	43.1	
1486	Sizwe Medical Fund	Sizwe Affordable	20,962	52,254	30.5	4.6	567,089	904.4	567,089	904.4	511,506	90.2	815.7	511,506	90.2	815.7	77,759	13.7	124.0	77,759	13.7	124.0	(22,176)	-3.9	-35.4		
		Sizwe Affordable Network	3,671	7,241	28.4	3.4	34,043	391.8	34,043	391.8	28,441	83.5	327.3	28,441	83.5	327.3	6,566	19.3	75.6	6,566	19.3	75.6	(964)	-2.8	-11.1		
		Sizwe Full Benefit	12,263	28,866	39.5	15.0	487,979	1,408.7	487,979	1,408.7	467,555	95.8	1,349.8	467,555	95.8	1,349.8	46,856	9.6	135.3	46,856	9.6	135.3	(26,432)	-5.4	-76.3		
		Sizwe Primary	25,138	68,061	28.2	2.3	473,531	579.8	473,531	579.8	397,702	84.0	486.9	397,702	84.0	486.9	89,332	18.9	109.4	89,332	18.9	109.4	(13,503)	-2.9	-16.5		
		Other*					11,878	-	11,878	-	11,981	100.9	-	11,981	100.9	-	2,012	16.9	-	2,012	16.9	-	(2,116)	-17.8	-		
		Consolidated	62,034	156,422	31.1	5.5	1,574,519	838.8	1,574,519	838.8	1,417,186	90.0	755.0	1,417,186	90.0	755.0	222,524	14.1	118.5	222,524	14.1	118.5	(65,191)	-4.1	-34.7	38.3	
1141	Spectramed	Alliance	12,149	21,520	31.6	6.0	220,024	852.0	220,024	852.0	183,653	83.5	711.2	183,653	83.5	711.2	45,008	20.5	174.3	45,008	20.5	174.3	(8,637)	-3.9	-33.4		
		Choice	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
		Elite	32,470	76,831	32.6	5.0	1,136,831	1,233.0	1,136,831	1,233.0	994,885	87.5	1,079.1	994,885	87.5	1,079.1	129,699	11.4	140.7	129,699	11.4	140.7	12,246	1.1	13.3		
		Hospital	3,266	6,779	36.9	10.0	44,381	545.6	44,381	545.6	34,833	78.5	428.2	34,833	78.5	428.2	10,432	23.5	128.2	10,432	23.5	128.2	(884)	-2.0	-10.9		
		Plus	1,146	2,083	53.4	33.5	52,778	2,111.5	52,778	2,111.5	68,861	130.5	2,754.9	68,861	130.5	2,754.9	4,540	8.6	181.6	4,540	8.6	181.6	(20,623)	-39.1	-825.1		
		Consolidated	49,031	107,213	33.1	6.1	1,454,014	1,130.2	1,454,014	1,130.2	1,282,233	88.2	996.6	1,282,233	88.2	996.6	189,679	13.0	147.4	189,679	13.0	147.4	(17,898)	-1.2	-13.9	17.0	
1464	Suremed Health	Challenger	634	1,493	35.6	10.7	22,942	1,280.5	22,942	1,280.5	19,341	84.3	1,079.5	19,341	84.3	1,079.5	3,109	13.6	173.5	3,109	13.6	173.5	492	2.1	27.5		
		Explorer	91	165	27.0	1.2	660	333.4	660	333.4	670	101.5	338.5	670	101.5	338.5	202	30.6	102.0	202	30.6	102.0	(212)	-32.1	-107.1		
		Navigator	714	1,776	31.5	2.3	15,924	747.2	13,230	620.8	13,588	85.3	637.6	12,423	93.9	582.9	3,278	20.6	153.8	3,278	24.8	153.8	(2,470)	-15.5	-115.9		
		Shuttle	112	252	28.7	1.6	1,166	385.6	1,166	385.6	691	59.2	228.4	691	59.2	228.4	284	24.4	94.0	284	24.4	94.0	191	16.4	63.3		
		Consolidated	1,551	3,686	32.8	5.6	40,693	920.0	37,999	859.1	34,290	84.3	775.2	33,124	87.2	748.9	6,873	16.9	155.4	6,873	18.1	155.4	(1,998)	-4.9	-45.2	76.3	
1147	Telemed	Bronze	3,076	5,052	31.7	8.8	28,186	464.9	28,186	464.9	35,447	125.8	584.7	35,447	125.8	584.7	2,365	8.4	39.0	2,365	8.4	39.0	(9,626)	-34.2	-158.8		
		Gold	8,766	20,112	39.1	14.0	361,239	1,496.8	361,239	1,496.8	276,993	76.7	1,147.7	276,543	76.6	1,145.8	39,697	11.0	164.5	39,697	11.0	164.5	44,999	12.5	186.5		
		Gold Select	2,147	3,478	62.0	57.7	82,001	1,964.8	82,001	1,964.8	84,805	103.4	2,031.9	84,805	103.4	2,031.9	2,165	2.6	51.9	2,165	2.6	51.9	(4,969)	-6.1	-119.0		
		Platinum	7,506	15,783	43.3	16.5	397,115	2,096.7	397,115	2,096.7	377,679	95.1	1,994.1	377,328	95.0	1,992.3	36,552	9.2	193.0	36,552	9.2	193.0	(16,765)	-4.2	-88.5		
		Silver	3,349	8,022	27.6	2.5	90,560	940.7	71,969	747.6	63,596	70.2	660.6	41,931	58.3	435.6	17,959	19.8	186.6	17,959	25.0	186.6	12,079	13.3	125.5		
		Consolidated	24,844	52,447	39.4	15.4	959,102	1,523.9	940,511	1,494.4	838,519	87.4	1,332.3	816,053	86.8	1,296.6	98,739	10.3	156.9	98,739	10.5	156.9	25,718	2.7	40.9	13.5	
1592	Thebemed	Energy	3,269	11,251	24.6	0.1	59,242	438.8	59,242	438.8	47,263	79.8	350.1	47,263	79.8	350.1	11,496	19.4	85.1	11,496	19.4	85.1	482	0.8	3.6		
		Frontier	932	3,153	27.1	0.7	23,909	631.9	23,909	631.9	20,361	85.2	538.1	20,361	85.2	538.1	3,818	16.0	100.9	3,818	16.0	100.9	(269)	-1.1	-7.1		



## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %	
Registered schemes:																											
open continued																											
1592	Thebemed	Universal	181	329	27.7	1.5	1,335	338.2	1,335	338.2	1,164	87.2	294.9	1,164	87.2	294.9	154	11.5	38.9	154	11.5	38.9	17	1.3	4.4		
	continued	Consolidated	4,382	14,733	25.2	0.2	84,487	477.9	84,487	477.9	68,788	81.4	389.1	68,788	81.4	389.1	15,468	18.3	87.5	15,468	18.3	87.5	231	0.3	1.3	14.3	
1422	Topmed Medical Scheme	Topmed 100%	345	497	63.0	54.7	22,355	3,748.3	22,355	3,748.3	19,853	88.8	3,328.8	19,852	88.8	3,328.7	1,420	6.4	238.1	1,420	6.4	238.1	1,082	4.8	181.5		
		Topmed 80%	699	1,215	58.5	47.3	32,526	2,230.9	32,526	2,230.9	29,241	89.9	2,005.5	29,240	89.9	2,005.5	2,855	8.8	195.8	2,855	8.8	195.8	432	1.3	29.6		
		Topmed Network	3,956	7,718	28.1	2.6	47,665	514.6	47,665	514.6	39,001	81.8	421.1	39,001	81.8	421.1	13,277	27.9	143.4	13,277	27.9	143.4	(4,613)	-9.7	-49.8		
		Topmed Hospital Plan	1,193	2,457	36.7	11.4	16,514	560.1	16,514	560.1	13,113	79.4	444.7	13,113	79.4	444.7	4,294	26.0	145.7	4,294	26.0	145.7	(893)	-5.4	-30.3		
		Topmed Incentive Comprehensive	2,245	5,072	42.8	17.0	79,859	1,312.1	68,171	1,120.0	79,718	99.8	1,309.8	66,801	98.0	1,097.5	9,025	11.3	148.3	9,025	13.2	148.3	(7,655)	-9.6	-125.8		
		Topmed Incentive Savings	3,167	8,063	33.0	6.1	68,223	705.1	58,287	602.4	54,358	79.7	561.8	44,066	75.6	455.4	12,660	18.6	130.8	12,660	21.7	130.8	1,561	2.3	16.1		
		Topmed Limited 100%	962	1,825	48.9	30.7	29,489	1,346.5	29,489	1,346.5	32,626	110.6	1,489.8	32,625	110.6	1,489.7	4,022	13.6	183.7	4,022	13.6	183.7	(7,159)	-24.3	-326.9		
		Consolidated	12,567	26,847	36.6	12.1	296,631	920.7	275,007	853.6	267,908	90.3	831.6	244,698	89.0	759.5	47,554	16.0	147.6	47,554	17.3	147.6	(17,245)	-5.8	-53.5	37.0	
Sub-total: registered open schemes			2,144,369	4,815,334	32.9	7.3	54,354,174	940.6	48,175,191	833.7	47,674,769	87.7	825.1	41,704,540	86.6	721.7	8,138,166	15.0	140.8	8,138,166	16.9	140.8	(1,667,515)	-3.1	-28.9	27.4	
Registered schemes: restricted																											
1005	AECI Medical Aid Society	Basic Carecross	1,523	4,046	27.2	0.3	23,990	494.1	23,990	494.1	16,248	67.7	334.7	16,248	67.7	334.7	4,400	18.3	90.6	4,400	18.3	90.6	3,341	13.9	68.8		
		Comprehensive	5,800	11,385	46.8	30.9	209,210	1,531.3	209,210	1,531.3	209,354	100.1	1,532.4	209,354	100.1	1,532.4	16,758	8.0	122.7	16,758	8.0	122.7	(16,902)	-8.1	-123.7		
		Consolidated	7,323	15,431	41.6	22.7	233,200	1,259.4	233,200	1,259.4	225,602	96.7	1,218.3	225,602	96.7	1,218.3	21,159	9.1	114.3	21,159	9.1	114.3	(13,560)	-5.8	-73.2	67.7	
1487	Afrisam SA	Afrisam Budget	91	180	33.8	6.7	1,986	919.4	1,986	919.4	1,235	62.2	571.8	1,235	62.2	571.8	390	19.7	180.7	390	19.7	180.7	360	18.2	166.9		
	Medical Scheme	Afrisam Deluxe	111	230	50.4	23.9	5,313	1,925.1	4,248	1,539.1	4,950	93.2	1,793.6	3,875	91.2	1,404.0	445	8.4	161.4	445	10.5	161.4	(73)	-1.4	-26.3		
		Afrisam Standard	947	947	42.6	23.0	31,606	2,781.2	25,261	2,222.9	33,167	104.9	2,918.6	26,642	105.5	2,344.4	3,922	12.4	345.2	3,922	15.5	345.2	(5,303)	-16.8	-466.6		
		Consolidated	1,149	2,448	42.7	21.9	38,905	1,324.4	31,495	1,072.1	39,353	101.2	1,339.6	31,752	100.8	1,080.9	4,758	12.2	162.0	4,758	15.1	162.0	(5,015)	-12.9	-170.7	46.2	
567	Afrox Medical Aid Society	Base Plan	3,157	7,391	30.3	5.3	75,207	848.0	75,207	848.0	72,628	96.6	818.9	72,628	96.6	818.9	7,712	10.3	87.0	7,712	10.3	87.0	(5,133)	-6.8	-57.9		
		Diamond Plan	119	167	71.5	82.4	6,203	3,095.2	6,203	3,095.2	5,990	96.6	2,989.1	5,990	96.6	2,989.1	636	10.3	317.4	636	10.3	317.4	(423)	-6.8	-211.3		
		Consolidated	3,276	7,558	31.4	7.3	81,410	897.6	81,410	897.6	78,618	96.6	866.8	78,618	96.6	866.8	8,348	10.3	92.0	8,348	10.3	92.0	(5,557)	-6.8	-61.3	141.1	
1456	Alliance Midmed	Alliance Midmed Policy 120	1,866	4,818	27.4	3.0	54,818	948.1	49,270	852.2	51,385	93.7	888.8	46,718	94.8	808.0	5,817	10.6	100.6	5,817	11.8	100.6	(3,265)	-6.0	-56.5		
	Medical Scheme	Consolidated	1,866	4,818	27.4	3.0	54,818	948.1	49,270	852.2	51,385	93.7	888.8	46,718	94.8	808.0	5,817	10.6	100.6	5,817	11.8	100.6	(3,265)	-6.0	-56.5	87.6	
1534	Altron Medical	Basic	1,184	2,370	35.0	13.2	30,615	1,076.5	24,456	859.9	23,749	77.6	835.1	18,232	74.6	641.1	4,315	14.1	151.7	4,315	17.6	151.7	1,908	6.2	67.1		
	Aid Scheme	Enhanced	3,052	7,074	37.0	12.3	101,401	1,194.5	81,150	956.0	111,445	109.9	1,312.8	91,631	112.9	1,079.4	9,972	9.8	117.5	9,972	12.3	117.5	(20,453)	-20.2	-240.9		
		Consolidated	4,236	9,444	36.5	12.5	132,016	1,164.9	105,606	931.9	135,194	102.4	1,192.9	109,863	104.0	969.4	14,287	10.8	126.1	14,287	13.5	126.1	(18,544)	-14.0	-163.6	29.5	
1012	Anglo Medical Scheme	Managed Care Plan	6,680	14,339	45.9	27.6	287,901	1,673.2	227,822	1,324.0	295,024	102.5	1,714.6	237,233	104.1	1,378.7	19,551	6.8	113.6	19,551	8.6	113.6	(28,962)	-10.1	-168.3		
		Standard Care Plan	4,822	11,950	30.0	6.7	106,196	740.6	106,196	740.6	102,383	96.4	714.0	102,383	96.4	714.0	10,499	9.9	73.2	10,499	9.9	73.2	(6,687)	-6.3	-46.6		

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
			As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %	
Registered schemes: restricted continued																											
1012	Anglo Medical Scheme	Value Care Plan	244	629	24.5	1.6	1,958	259.4	1,958	259.4	1,732	88.5	229.5	1,732	88.5	229.5	278	14.2	36.9	278	14.2	36.9	(52)	-2.7	-7.0		
	continued	Consolidated	11,746	26,918	38.3	17.7	396,055	1,226.1	335,976	1,040.1	399,139	100.8	1,235.7	341,348	101.6	1,056.8	30,329	7.7	93.9	30,329	9.0	93.9	(35,701)	-9.0	-110.5	458.5	
1571	Anglovaal Group Medical Scheme	Anglovaal Group Medical Scheme	4,289	8,805	39.2	18.9	124,106	1,174.6	93,107	881.2	115,632	93.2	1,094.4	86,428	92.8	818.0	13,723	11.1	129.9	13,723	14.7	129.9	(7,043)	-5.7	-66.7		
		Consolidated	4,289	8,805	39.2	18.9	124,106	1,174.6	93,107	881.2	115,632	93.2	1,094.4	86,428	92.8	818.0	13,723	11.1	129.9	13,723	14.7	129.9	(7,043)	-5.7	-66.7	85.1	
1279	Bankmed	Bankmed Basic	13,705	21,747	23.8	0.7	143,227	548.8	143,227	548.8	102,068	71.3	391.1	102,068	71.3	391.1	31,935	22.3	122.4	31,935	22.3	122.4	9,223	6.4	35.3		
		Bankmed Comprehensive	51,714	107,794	31.4	7.6	1,404,150	1,085.5	1,145,527	885.6	1,295,683	92.3	1,001.7	1,038,981	90.7	803.2	131,113	9.3	101.4	131,113	11.4	101.4	(24,567)	-1.7	-19.0		
		Bankmed Core	10,967	18,366	23.5	1.0	151,303	686.5	128,707	584.0	105,395	69.7	478.2	79,230	61.6	359.5	28,030	18.5	127.2	28,030	21.8	127.2	21,447	14.2	97.3		
		Bankmed Plus	6,623	14,797	41.1	17.0	317,967	1,790.7	245,018	1,379.9	340,716	107.2	1,918.8	276,439	112.8	1,556.8	16,960	5.3	95.5	16,960	6.9	95.5	(48,381)	-15.2	-272.5		
		Bankmed Traditional	17,496	37,252	28.3	3.6	429,757	961.4	429,757	961.4	398,889	92.8	892.3	398,889	92.8	892.3	44,657	10.4	99.9	44,657	10.4	99.9	(13,790)	-3.2	-30.8		
		Consolidated	100,505	199,956	30.0	6.2	2,446,403	1,019.6	2,092,235	872.0	2,242,752	91.7	934.7	1,895,608	90.6	790.0	252,696	10.3	105.3	252,696	12.1	105.3	(56,068)	-2.3	-23.4	51.1	
1507	Barloworld Medical Scheme	Barloworld Medical Scheme	5,865	12,505	38.5	18.6	210,280	1,401.3	210,280	1,401.3	202,165	96.1	1,347.2	202,165	96.1	1,347.2	16,176	7.7	107.8	16,176	7.7	107.8	(8,061)	-3.8	-53.7		
		Consolidated	5,865	12,505	38.5	18.6	210,280	1,401.3	210,280	1,401.3	202,165	96.1	1,347.2	202,165	96.1	1,347.2	16,176	7.7	107.8	16,176	7.7	107.8	(8,061)	-3.8	-53.7	54.9	
1526	BMW Employees Medical Aid Society	BMW Option 119	2,221	6,137	29.7	1.7	66,666	905.3	65,999	896.2	76,976	115.5	1,045.2	69,333	105.1	941.5	5,286	7.9	71.8	5,286	8.0	71.8	(8,620)	-12.9	-117.1		
		Consolidated	2,221	6,137	29.7	1.7	66,666	905.3	65,999	896.2	76,976	115.5	1,045.2	69,333	105.1	941.5	5,286	7.9	71.8	5,286	8.0	71.8	(8,620)	-12.9	-117.1	79.4	
1237	BP Medical Aid Society	BPSA Medical Society	2,367	5,360	39.9	20.2	61,496	956.1	61,496	956.1	73,268	119.1	1,139.1	73,268	119.1	1,139.1	5,303	8.6	82.4	5,303	8.6	82.4	(17,075)	-27.8	-265.5		
		Consolidated	2,367	5,360	39.9	20.2	61,496	956.1	61,496	956.1	73,268	119.1	1,139.1	73,268	119.1	1,139.1	5,303	8.6	82.4	5,303	8.6	82.4	(17,075)	-27.8	-265.5	87.7	
1590	Building & Construction Industry Medical Aid Fund	Basic Option	5,036	12,654	30.6	3.3	56,452	371.8	56,452	371.8	47,738	84.6	314.4	47,738	84.6	314.4	8,226	14.6	54.2	8,226	14.6	54.2	488	0.9	3.2		
		Consolidated	5,036	12,654	30.6	3.3	56,452	371.8	56,452	371.8	47,738	84.6	314.4	47,738	84.6	314.4	8,226	14.6	54.2	8,226	14.6	54.2	488	0.9	3.2	67.1	
1593	Built Environment Professional Associations Medical Scheme (BEPS)	Pro-Basic	169	301	26.7	1.7	1,619	448.3	1,619	448.3	827	51.1	229.0	827	51.1	229.0	410	25.3	113.6	410	25.3	113.6	382	23.6	105.7		
		Pro-Core	1,066	2,367	29.5	3.8	16,687	587.5	16,687	587.5	11,377	68.2	400.5	11,238	67.3	395.7	2,573	15.4	90.6	2,573	15.4	90.6	2,876	17.2	101.3		
		Pro-Elite	835	2,102	37.9	8.4	36,612	1,451.5	28,144	1,115.8	34,897	95.3	1,383.5	26,236	93.2	1,040.1	1,771	4.8	70.2	1,771	6.3	70.2	138	0.4	5.5		
		Consolidated	2,070	4,770	33.0	5.7	54,918	959.4	46,451	811.5	47,101	85.8	822.9	38,301	82.5	669.1	4,754	8.7	83.0	4,754	10.2	83.0	3,396	6.2	59.3	10.1	
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	CA - Alliance	1,126	2,436	39.8	15.3	64,252	2,198.0	56,909	1,946.8	74,613	116.1	2,552.4	67,756	119.1	2,317.9	4,209	6.6	144.0	4,209	7.4	144.0	(15,056)	-23.4	-515.1		
		CA - Double Plus	8,892	18,558	28.2	4.0	311,057	1,396.8	274,519	1,232.7	278,944	89.7	1,252.6	249,138	90.8	1,118.7	29,541	9.5	132.7	29,541	10.8	132.7	(4,160)	-1.3	-18.7		
		CA - First Choice	6,857	8,571	27.9	4.7	78,437	762.6	78,437	762.6	60,515	77.2	588.4	60,515	77.2	588.4	20,654	26.3	200.8	20,654	26.3	200.8	(2,731)	-3.5	-26.6		
		CA - Vital	5,068	8,839	30.0	5.0	90,384	852.1	90,381	852.1	64,214	71.0	605.4	64,215	71.0	605.4	16,165	17.9	152.4	16,165	17.9	152.4	10,001	11.1	94.3		
		Network Choice	1,825	2,858	23.4	0.4	24,399	711.4	24,399	711.4	14,514	59.5	423.2	14,514	59.5	423.2	5,654	23.2	164.9	5,654	23.2	164.9	4,231	17.3	123.4		
		Consolidated	23,768	41,262	28.8	4.8	568,530	1,148.2	524,644	1,059.6	492,799	86.7	995.3	456,137	86.9	921.2	76,224	13.4	153.9	76,224	14.5	153.9	(7,716)	-1.4	-15.6	39.4	

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %	
Registered schemes:																											
restricted continued																											
1521	Clicks Group Medical Scheme	Clicks Group Medical Scheme	644	1,313	32.0	3.7	12,705	806.3	12,705	806.3	10,995	86.5	697.8	10,990	86.5	697.5	1,999	15.7	126.9	1,999	15.7	126.9	(284)	-2.2	-18.0		
		Consolidated	644	1,313	32.0	3.7	12,705	806.3	12,705	806.3	10,995	86.5	697.8	10,990	86.5	697.5	1,999	15.7	126.9	1,999	15.7	126.9	(284)	-2.2	-18.0	64.3	
1068	De Beers Benefit Society	De Beers Benefit Society	7,092	15,980	38.4	13.0	223,640	1,166.2	223,640	1,166.2	225,984	101.0	1,178.5	225,984	101.0	1,178.5	17,868	8.0	93.2	17,868	8.0	93.2	(20,212)	-9.0	-105.4		
		Consolidated	7,092	15,980	38.4	13.0	223,640	1,166.2	223,640	1,166.2	225,984	101.0	1,178.5	225,984	101.0	1,178.5	17,868	8.0	93.2	17,868	8.0	93.2	(20,212)	-9.0	-105.4	129.1	
1484	Edcon Medical Aid Scheme	Essential Comprehensive	859	1,665	44.0	23.2	31,710	1,587.1	25,378	1,270.2	35,902	113.2	1,796.9	29,810	117.5	1,492.0	2,582	8.1	129.2	2,582	10.2	129.2	(7,013)	-22.1	-351.0		
		Essential Limited	1,254	2,600	28.6	4.4	21,985	704.6	17,602	564.2	17,394	79.1	557.5	13,022	74.0	417.4	3,866	17.6	123.9	3,866	22.0	123.9	715	3.3	22.9		
		Essential Saver	1,556	3,093	26.7	3.3	25,012	673.9	20,026	539.6	18,455	73.8	497.2	13,631	68.1	367.2	4,429	17.7	119.3	4,429	22.1	119.3	1,966	7.9	53.0		
		Consolidated	3,669	7,358	31.3	8.2	78,707	891.4	63,007	713.6	71,751	91.2	812.6	56,462	89.6	639.5	10,877	13.8	123.2	10,877	17.3	123.2	(4,332)	-5.5	-49.1	31.1	
1572	Engen Medical Benefit Fund	Engen Medical Benefit Fund	3,551	8,257	35.8	12.8	115,706	1,167.8	98,350	992.6	107,442	92.9	1,084.4	91,956	93.5	928.1	8,264	7.1	83.4	8,264	8.4	83.4	(1,870)	-1.6	-18.9		
		Consolidated	3,551	8,257	35.8	12.8	115,706	1,167.8	98,350	992.6	107,442	92.9	1,084.4	91,956	93.5	928.1	8,264	7.1	83.4	8,264	8.4	83.4	(1,870)	-1.6	-18.9	55.0	
1585	Eyethumed Medical Scheme	Option 508	3,303	6,736	32.9	0.6	33,755	417.6	33,755	417.6	33,968	100.6	420.2	33,968	100.6	420.2	7,191	21.3	89.0	7,191	21.3	89.0	(7,404)	-21.9	-91.6		
		Consolidated	3,303	6,736	32.9	0.6	33,755	417.6	33,755	417.6	33,968	100.6	420.2	33,968	100.6	420.2	7,191	21.3	89.0	7,191	21.3	89.0	(7,404)	-21.9	-91.6	65.6	
1271	Fishing Industry Medical Scheme (Fishmed)	Primary	662	1,666	25.0	0.4	2,672	133.7	2,672	133.7	1,774	66.4	88.7	1,774	66.4	88.7	937	35.1	46.9	937	35.1	46.9	(39)	-1.4	-1.9		
		Standard	176	479	25.8	0.2	1,506	262.0	1,506	262.0	1,557	103.4	270.9	1,557	103.4	270.9	186	12.3	32.4	186	12.3	32.4	(237)	-15.8	-41.3		
		Consolidated	838	2,145	25.2	0.3	4,178	162.3	4,178	162.3	3,331	79.7	129.4	3,331	79.7	129.4	1,123	26.9	43.6	1,123	26.9	43.6	(276)	-6.6	-10.7	154.8	
1086	Food Workers Medical Benefit Fund	Food Workers Medical Benefit Fund	14,412	19,838	30.4	0.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
		Other*					15,976	-	15,976	-	9,265	58.0	-	9,265	58.0	-	3,363	21.0	-	3,363	21.0	-	3,348	21.0	-		
		Consolidated	14,412	19,838	30.4	0.3	15,976	67.1	15,976	67.1	9,265	58.0	38.9	9,265	58.0	38.9	3,363	21.0	14.1	3,363	21.0	14.1	3,348	21.0	14.1	353.1	
1578	Foschini Group Medical Aid Scheme	Plan A	1,468	2,881	25.9	1.6	19,879	575.0	19,879	575.0	17,356	87.3	502.0	17,356	87.3	502.0	2,741	13.8	79.3	2,741	13.8	79.3	(218)	-1.1	-6.3		
		Plan B	1,164	2,587	34.4	9.6	30,347	977.5	30,347	977.5	35,548	117.1	1,145.1	35,548	117.1	1,145.1	2,269	7.5	73.1	2,269	7.5	73.1	(7,470)	-24.6	-240.6		
		Consolidated	2,632	5,468	29.9	5.4	50,226	765.5	50,226	765.5	52,904	105.3	806.3	52,904	105.3	806.3	5,011	10.0	76.4	5,011	10.0	76.4	(7,688)	-15.3	-117.2	66.5	
1568	Gold Fields Medical Scheme	Pride Plan	982	1,806	27.7	0.1	7,454	343.9	7,454	343.9	8,866	118.9	409.1	8,866	118.9	409.1	793	10.6	36.6	793	10.6	36.6	(2,205)	-29.6	-101.7		
		Heritage Plan	7,874	18,022	29.5	1.5	157,653	729.0	157,653	729.0	145,348	92.2	672.1	145,348	92.2	672.1	21,361	13.5	98.8	21,361	13.5	98.8	(9,056)	-5.7	-41.9		
		Consolidated	8,856	19,828	29.4	1.4	165,107	693.9	165,107	693.9	154,214	93.4	648.1	154,214	93.4	648.1	22,154	13.4	93.1	22,154	13.4	93.1	(11,261)	-6.8	-47.3	71.1	
1270	Golden Arrow Employees Medical Benefit Fund	Advance	354	901	37.2	6.4	3,704	342.6	3,704	342.6	6,358	171.7	588.1	6,358	171.7	588.1	643	17.4	59.5	643	17.4	59.5	(3,298)	-89.0	-305.0		
		Primary	146	202	69.9	81.2	391	161.3	391	161.3	783	200.2	323.0	783	200.2	323.0	194	49.7	80.1	194	49.7	80.1	(586)	-149.9	-241.8		
		Standard	2,233	5,404	30.2	3.5	15,455	238.3	15,455	238.3	24,350	157.6	375.5	24,350	157.6	375.5	3,879	25.1	59.8	3,879	25.1	59.8	(12,774)	-82.7	-197.0		
		Consolidated	2,733	6,507	32.4	6.3	19,550	250.4	19,550	250.4	31,492	161.1	403.3	31,492	161.1	403.3	4,716	24.1	60.4	4,716	24.1	60.4	(16,658)	-85.2	-213.3	99.8	

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution  Income (GCI)		Risk Contribution  Income (RCI)		Gross relevant healthcare  expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare  expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare  expenses (incl. PMSA)			Net non-healthcare  expenses			Net healthcare  results			Solvency  ratio	
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %	
Registered schemes:																											
restricted continued																											
1598	Government Employees Medical Scheme (GEMS)	Beryl	11,993	31,646	27.6	2.6	158,078	416.3	158,078	416.3	124,452	78.7	327.7	124,452	78.7	327.7	15,709	9.9	41.4	15,709	9.9	41.4	17,917	11.3	47.2		
		Emerald	312,827	879,829	25.6	1.8	6,897,421	653.3	6,897,421	653.3	6,307,714	91.5	597.4	6,307,714	91.5	597.4	456,269	6.6	43.2	456,269	6.6	43.2	133,439	1.9	12.6		
		Onyx	29,568	71,809	35.2	9.0	904,399	1,049.5	904,399	1,049.5	1,094,287	121.0	1,269.9	1,094,287	121.0	1,269.9	46,865	5.2	54.4	46,865	5.2	54.4	(236,754)	-26.2	-274.7		
		Ruby	34,290	92,673	25.4	1.3	716,592	644.4	537,435	483.3	457,316	63.8	411.2	309,329	57.6	278.2	50,754	7.1	45.6	50,754	9.4	45.6	177,352	24.7	159.5		
		Sapphire	21,126	71,940	26.6	1.2	222,474	257.7	222,474	257.7	110,316	49.6	127.8	110,316	49.6	127.8	23,244	10.4	26.9	23,244	10.4	26.9	88,914	40.0	103.0		
		Consolidated	409,804	1,147,897	26.3	2.2	8,898,964	646.0	8,719,807	633.0	8,094,085	91.0	587.6	7,946,098	91.1	576.9	592,841	6.7	43.0	592,841	6.8	43.0	180,868	2.0	13.1	11.1	
1523	Grintek Electronics Medical Aid Scheme	Option I	1,140	2,817	30.7	2.7	28,624	846.8	28,624	846.8	30,919	108.0	914.7	30,837	107.7	912.2	3,544	12.4	104.8	3,544	12.4	104.8	(5,756)	-20.1	-170.3		
		Consolidated	1,140	2,817	30.7	2.7	28,624	846.8	28,624	846.8	30,919	108.0	914.7	30,837	107.7	912.2	3,544	12.4	104.8	3,544	12.4	104.8	(5,756)	-20.1	-170.3	91.3	
1111	IBM (SA) Medical Scheme	Essential Comprehensive	2,243	5,086	35.0	8.8	56,989	933.8	46,520	762.2	54,897	96.3	899.5	44,150	94.9	723.4	6,934	12.2	113.6	6,934	14.9	113.6	(4,564)	-8.0	-74.8		
		Consolidated	2,243	5,086	35.0	8.8	56,989	933.8	46,520	762.2	54,897	96.3	899.5	44,150	94.9	723.4	6,934	12.2	113.6	6,934	14.9	113.6	(4,564)	-8.0	-74.8	27.0	
1591	Impala Medical Plan	Impala Medical Plan	7,526	16,034	30.4	2.1	51,648	268.4	51,648	268.4	46,743	90.5	242.9	46,743	90.5	242.9	650	1.3	3.4	650	1.3	3.4	4,255	8.2	22.1		
		Consolidated	7,526	16,034	30.4	2.1	51,648	268.4	51,648	268.4	46,743	90.5	242.9	46,743	90.5	242.9	650	1.3	3.4	650	1.3	3.4	4,255	8.2	22.1	28.3	
1559	Imperial Group Medical Scheme	Imperial Group Medical Scheme	6,118	14,526	28.8	2.3	157,483	903.5	157,483	903.5	149,273	94.8	856.4	149,021	94.6	854.9	17,764	11.3	101.9	17,764	11.3	101.9	(9,302)	-5.9	-53.4		
		Consolidated	6,118	14,526	28.8	2.3	157,483	903.5	157,483	903.5	149,273	94.8	856.4	149,021	94.6	854.9	17,764	11.3	101.9	17,764	11.3	101.9	(9,302)	-5.9	-53.4	96.8	
1145	LA-Health Medical Scheme	LA Active	8,686	22,173	28.0	4.1	215,863	811.3	171,323	643.9	162,657	75.4	611.3	120,720	70.5	453.7	31,934	14.8	120.0	31,934	18.6	120.0	18,670	8.6	70.2		
		LA Comprehensive	3,679	5,962	57.3	46.0	154,303	2,156.8	129,640	1,812.0	155,910	101.0	2,179.2	133,306	102.8	1,863.3	14,168	9.2	198.0	14,168	10.9	198.0	(17,834)	-11.6	-249.3		
		LA Core	6,596	11,399	56.1	41.7	251,694	1,840.0	213,168	1,558.4	235,940	93.7	1,724.9	195,666	91.8	1,430.4	25,831	10.3	188.8	25,831	12.1	188.8	(8,329)	-3.3	-60.9		
		LA Focus	2,858	6,645	29.5	5.4	55,280	693.2	41,477	520.2	43,716	79.1	548.2	30,776	74.2	386.0	10,649	19.3	133.5	10,649	25.7	133.5	53	0.1	0.7		
		LA Keyplus	2,786	6,683	26.5	1.5	32,919	410.5	32,919	410.5	26,367	80.1	328.8	26,367	80.1	328.8	6,523	19.8	81.3	6,523	19.8	81.3	29	0.1	0.4		
		Consolidated	24,605	52,862	37.4	16.8	710,059	1,119.4	588,527	927.8	624,591	88.0	984.6	506,834	86.1	799.0	89,104	12.5	140.5	89,104	15.1	140.5	(7,412)	-1.0	-11.7	33.5	
1197	Libcare Medical Scheme	Libcare	5,702	12,830	29.5	5.1	170,493	1,107.4	136,503	886.6	154,375	90.5	1,002.7	124,171	91.0	806.5	17,276	10.1	112.2	17,276	12.7	112.2	(4,944)	-2.9	-32.1		
		Consolidated	5,702	12,830	29.5	5.1	170,493	1,107.4	136,503	886.6	154,375	90.5	1,002.7	124,171	91.0	806.5	17,276	10.1	112.2	17,276	12.7	112.2	(4,944)	-2.9	-32.1	77.1	
1599	Lonmin Medical Scheme	Lonmin Medical Scheme Benefit Plan	13,840	14,792	35.7	-	70,764	398.7	70,764	398.7	56,730	80.2	319.6	56,730	80.2	319.6	13,356	18.9	75.2	13,356	18.9	75.2	678	1.0	3.8		
		Consolidated	13,840	14,792	35.7	-	70,764	398.7	70,764	398.7	56,730	80.2	319.6	56,730	80.2	319.6	13,356	18.9	75.2	13,356	18.9	75.2	678	1.0	3.8	19.0	
1547	Malcor Medical Scheme	Plan A	1,651	4,009	40.5	15.3	61,357	1,275.4	61,357	1,275.4	74,832	122.0	1,555.5	74,832	122.0	1,555.5	4,420	7.2	91.9	4,420	7.2	91.9	(17,895)	-29.2	-372.0		
		Plan B	2,518	5,811	30.0	3.9	60,120	862.2	60,120	862.2	52,378	87.1	751.1	52,378	87.1	751.1	10,150	16.9	145.6	10,150	16.9	145.6	(2,408)	-4.0	-34.5		
		Plan C	430	692	31.3	3.5	6,939	835.6	5,207	627.1	4,886	70.4	588.4	3,495	67.1	420.8	1,092	15.7	131.5	1,092	21.0	131.5	621	9.0	74.8		
		Consolidated	4,599	10,512	34.1	8.2	128,416	1,018.0	126,684	1,004.3	132,096	102.9	1,047.2	130,705	103.2	1,036.2	15,661	12.2	124.2	15,661	12.4	124.2	(19,682)	-15.3	-156.0	27.4	
1495	Massmart Health Plan	Massmart Health Plan	2,189	4,797	30.7	2.2	66,777	1,160.0	50,077	869.9	59,804	89.6	1,038.9	48,026	95.9	834.3	5,608	8.4	97.4	5,608	11.2	97.4	(3,557)	-5.3	-61.8		
		Consolidated	2,189	4,797	30.7	2.2	66,777	1,160.0	50,077	869.9	59,804	89.6	1,038.9	48,026	95.9	834.3	5,608	8.4	97.4	5,608	11.2	97.4	(3,557)	-5.3	-61.8	71.8	

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution		Risk Contribution		Gross relevant healthcare			Net relevant healthcare			Gross non-healthcare			Net non-healthcare			Net healthcare			Solvency
			As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpmm	R'000	pbpmm	R'000	As % of GCI	pbpmm	R'000	As % of RCI	pbpmm	R'000	As % of GCI	pbpmm	R'000	As % of RCI	pbpmm	R'000	As % of GCI	pbpmm	2009
Ref no.	Name of medical scheme	Name of benefit option					R		R																	%
Registered schemes:																										
restricted continued																										
1039	MBMed Medical Aid Fund	MBMed	3,303	8,746	29.9	4.6	86,869	827.7	86,869	827.7	90,780	104.5	865.0	90,780	104.5	865.0	8,078	9.3	77.0	8,078	9.3	77.0	(11,989)	-13.8	-114.2	
		Consolidated	3,303	8,746	29.9	4.6	86,869	827.7	86,869	827.7	90,780	104.5	865.0	90,780	104.5	865.0	8,078	9.3	77.0	8,078	9.3	77.0	(11,989)	-13.8	-114.2	65.5
1588	MEDCOR	Core	4,739	13,242	26.9	0.4	156,431	984.4	156,431	984.4	130,455	83.4	821.0	130,455	83.4	821.0	21,171	13.5	133.2	21,171	13.5	133.2	4,805	3.1	30.2	
		Core Plus	11,183	27,271	37.9	10.6	384,503	1,174.9	384,503	1,174.9	421,406	109.6	1,287.7	421,406	109.6	1,287.7	52,398	13.6	160.1	52,398	13.6	160.1	(89,301)	-23.2	-272.9	
		Consolidated	15,922	40,513	34.3	7.2	540,934	1,112.7	540,934	1,112.7	551,861	102.0	1,135.2	551,861	102.0	1,135.2	73,569	13.6	151.3	73,569	13.6	151.3	(84,496)	-15.6	-173.8	10.9
1548	Medipos Medical Scheme	Option A	2,801	4,466	57.8	51.3	114,634	2,139.0	91,703	1,711.1	115,275	100.6	2,151.0	95,387	104.0	1,779.9	7,542	6.6	140.7	7,542	8.2	140.7	(11,226)	-9.8	-209.5	
		Option B	6,714	16,001	30.5	5.7	152,256	793.0	114,204	594.8	141,245	92.8	735.6	106,174	93.0	553.0	16,002	10.5	83.3	16,002	14.0	83.3	(7,973)	-5.2	-41.5	
		Option C	1,187	2,664	28.1	0.9	13,444	420.5	10,083	315.4	11,764	87.5	368.0	8,677	86.1	271.4	3,817	28.4	119.4	3,817	37.9	119.4	(2,412)	-17.9	-75.4	
		Consolidated	10,702	23,131	35.5	13.9	280,334	1,010.0	215,990	778.1	268,285	95.7	966.5	210,239	97.3	757.4	27,362	9.8	98.6	27,362	12.7	98.6	(21,610)	-7.7	-77.9	91.8
1535	Metrocare	Metrocare Plan 211	1,484	3,584	36.9	7.8	52,669	1,224.6	52,669	1,224.6	54,758	104.0	1,273.2	54,758	104.0	1,273.2	4,113	7.8	95.6	4,113	7.8	95.6	(6,202)	-11.8	-144.2	
		Consolidated	1,484	3,584	36.9	7.8	52,669	1,224.6	52,669	1,224.6	54,758	104.0	1,273.2	54,758	104.0	1,273.2	4,113	7.8	95.6	4,113	7.8	95.6	(6,202)	-11.8	-144.2	176.8
1105	Metropolitan	Classic	1,552	3,274	21.6	0.7	15,710	399.9	15,710	399.9	3,395	21.6	86.4	3,395	21.6	86.4	2,773	17.7	70.6	2,773	17.7	70.6	9,542	60.7	242.9	
	Medical Scheme	Premier	4,182	10,430	29.3	5.3	111,272	889.0	111,272	889.0	121,039	108.8	967.1	121,039	108.8	967.1	9,715	8.7	77.6	9,715	8.7	77.6	(19,483)	-17.5	-155.7	
		Consolidated	5,734	13,704	27.5	4.2	126,981	772.2	126,981	772.2	124,434	98.0	756.7	124,434	98.0	756.7	12,488	9.8	75.9	12,488	9.8	75.9	(9,941)	-7.8	-60.4	69.2
1569	Minemed Medical	Affordable Option	754	1,619	28.7	1.4	7,481	385.1	7,481	385.1	7,925	105.9	407.9	7,925	105.9	407.9	511	6.8	26.3	511	6.8	26.3	(954)	-12.8	-49.1	
	Scheme	Optimum	226	450	41.0	14.2	9,201	1,704.0	9,201	1,704.0	15,576	169.3	2,884.5	15,576	169.3	2,884.5	554	6.0	102.6	554	6.0	102.6	(6,929)	-75.3	-1,283.1	
		Primary Plus	109	165	49.7	32.7	1,724	870.9	1,724	870.9	1,742	101.0	879.7	1,742	101.0	879.7	221	12.8	111.8	221	12.8	111.8	(239)	-13.8	-120.6	
		Essential	5,509	12,361	37.3	9.3	156,080	1,052.2	156,080	1,052.2	143,219	91.8	965.5	143,219	91.8	965.5	12,232	7.8	82.5	12,232	7.8	82.5	629	0.4	4.2	
		Consolidated	6,598	14,595	36.6	8.8	174,487	996.3	174,487	996.3	168,462	96.5	961.9	168,462	96.5	961.9	13,518	7.7	77.2	13,518	7.7	77.2	(7,492)	-4.3	-42.8	11.5
1566	Moremed Medical	Hospital	116	195	39.4	15.9	1,629	696.1	1,385	591.7	1,929	118.4	824.4	1,738	125.5	742.7	321	19.7	137.1	321	23.2	137.1	(674)	-41.4	-288.0	
	Scheme	Major Medical	157	264	24.7	-	786	248.0	786	248.0	169	21.5	53.2	169	21.5	53.2	409	52.1	129.1	409	52.1	129.1	208	26.5	65.7	
		Major Medical Plan with CareCross	1,107	1,987	24.4	1.2	9,653	404.8	9,653	404.8	8,969	92.9	376.1	8,965	92.9	376.0	2,962	30.7	124.2	2,962	30.7	124.2	(2,274)	-23.6	-95.4	
		Consolidated	1,380	2,446	25.6	2.3	12,067	411.1	11,823	402.8	11,067	91.7	377.0	10,871	92.0	370.4	3,692	30.6	125.8	3,692	31.2	125.8	(2,740)	-22.7	-93.4	65.4
1600	Motohealth Care	Classic	15,796	37,613	33.8	8.9	502,200	1,112.6	502,200	1,112.6	451,301	89.9	999.9	451,301	89.9	999.9	53,269	10.6	118.0	53,269	10.6	118.0	(2,370)	-0.5	-5.3	
		Custom	9,334	22,414	26.8	1.9	115,362	428.9	115,362	428.9	74,207	64.3	275.9	74,207	64.3	275.9	19,500	16.9	72.5	19,500	16.9	72.5	21,655	18.8	80.5	
		Essential	7,940	18,480	27.2	0.5	32,068	144.6	32,068	144.6	24,717	77.1	111.5	24,717	77.1	111.5	8,717	27.2	39.3	8,717	27.2	39.3	(1,366)	-4.3	-6.2	
		Hospicare	3,111	5,587	37.9	19.8	51,503	768.2	51,503	768.2	49,948	97.0	745.0	49,948	97.0	745.0	9,395	18.2	140.1	9,395	18.2	140.1	(7,840)	-15.2	-116.9	
		Optimum	2,935	6,802	39.5	11.7	158,135	1,937.4	158,135	1,937.4	162,175	102.6	1,986.9	162,175	102.6	1,986.9	13,359	8.4	163.7	13,359	8.4	163.7	(17,398)	-11.0	-213.1	
		Consolidated	39,116	90,896	31.4	6.3	859,269	787.8	859,269	787.8	762,348	88.7	698.9	762,348	88.7	698.9	104,240	12.1	95.6	104,240	12.1	95.6	(7,320)	-0.9	-6.7	38.5
1154	Nampak SA	Extended Option	2,599	5,903	41.8	16.4	100,652	1,420.9	87,788	1,239.3	108,144	107.4	1,526.7	95,248	108.5	1,344.6	7,080	7.0	99.9	7,080	8.1	99.9	(14,540)	-14.4	-205.3	
	Medical Scheme	Standard Option	2,651	6,601	28.9	3.1	57,560	726.7	57,560	726.7	47,938	83.3	605.2	47,938	83.3	605.2	7,221	12.5	91.2	7,221	12.5	91.2	2,401	4.2	30.3	



## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio
			As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm	R'000	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	2009
Ref no.	Name of medical scheme	Name of benefit option	31.12.2009	31.12.2009				R		R			R			R			R			R			R	%
Registered schemes:																										
restricted continued																										
1154	Nampak SA	Consolidated	5,250	12,504	35.0	9.4	158,213	1,054.4	145,348	968.7	156,081	98.7	1,040.2	143,185	98.5	954.3	14,301	9.0	95.3	14,301	9.8	95.3	(12,139)	-7.7	-80.9	64.7
	Medical Scheme continued																									
1241	Naspers Medical Fund	M-Med Option	2,279	4,921	30.3	1.8	53,689	909.2	40,285	682.2	52,698	98.2	892.4	39,742	98.7	673.0	5,826	10.9	98.7	5,826	14.5	98.7	(5,283)	-9.8	-89.5	
		N Option Basic	599	1,033	25.8	0.7	6,385	515.1	6,385	515.1	5,710	89.4	460.7	5,710	89.4	460.7	1,537	24.1	124.0	1,537	24.1	124.0	(863)	-13.5	-69.6	
		N Option Plus	3,566	6,841	35.2	9.3	93,748	1,142.0	79,614	969.8	105,295	112.3	1,282.6	92,108	115.7	1,122.0	8,908	9.5	108.5	8,908	11.2	108.5	(21,402)	-22.8	-260.7	
		Consolidated	6,444	12,795	32.6	5.7	153,821	1,001.8	126,283	822.5	163,703	106.4	1,066.2	137,560	108.9	895.9	16,272	10.6	106.0	16,272	12.9	106.0	(27,549)	-17.9	-179.4	51.5
1469	Nedgroup Medical	Hospital	4,071	7,113	30.6	5.6	43,397	508.4	43,397	508.4	32,046	73.8	375.4	32,047	73.8	375.5	9,681	22.3	113.4	9,681	22.3	113.4	1,668	3.8	19.5	
	Aid Scheme	Network	1,374	3,278	36.8	13.2	37,741	959.5	37,741	959.5	43,520	115.3	1,106.4	43,521	115.3	1,106.4	1,729	4.6	43.9	1,729	4.6	43.9	(7,509)	-19.9	-190.9	
		Platinum	2,476	6,002	39.3	14.7	92,446	1,283.5	92,446	1,283.5	107,891	116.7	1,498.0	107,889	116.7	1,498.0	6,051	6.5	84.0	6,051	6.5	84.0	(21,493)	-23.2	-298.4	
		Savings	9,880	17,114	27.1	3.3	149,710	729.0	117,769	573.5	122,823	82.0	598.1	95,646	81.2	465.7	24,258	16.2	118.1	24,258	20.6	118.1	(2,135)	-1.4	-10.4	
		Traditional	7,162	15,388	38.2	15.1	186,218	1,008.5	186,218	1,008.5	191,317	102.7	1,036.1	188,967	101.5	1,023.3	17,161	9.2	92.9	17,161	9.2	92.9	(19,910)	-10.7	-107.8	
		Consolidated	24,963	48,895	33.2	9.4	509,512	868.4	477,571	813.9	497,597	97.7	848.1	468,070	98.0	797.7	58,880	11.6	100.4	58,880	12.3	100.4	(49,380)	-9.7	-84.2	45.1
1584	Netcare Medical Scheme	Netcare Savings Option	15,780	36,709	27.5	2.1	424,296	963.2	361,910	821.6	385,043	90.7	874.1	327,904	90.6	744.4	32,377	7.6	73.5	32,377	8.9	73.5	1,630	0.4	3.7	
		Consolidated	15,780	36,709	27.5	2.1	424,296	963.2	361,910	821.6	385,043	90.7	874.1	327,904	90.6	744.4	32,377	7.6	73.5	32,377	8.9	73.5	1,630	0.4	3.7	54.0
1214	Old Mutual Staff	Hospital Plan	1,790	3,663	31.7	7.8	21,172	481.7	21,175	481.7	15,730	74.3	357.9	15,494	73.2	352.5	4,233	20.0	96.3	4,233	20.0	96.3	1,449	6.8	33.0	
	Medical Aid Fund	Network Plan	1,110	2,156	30.7	6.9	15,197	587.4	15,046	581.6	11,338	74.6	438.2	11,158	74.2	431.3	2,350	15.5	90.8	2,350	15.6	90.8	1,538	10.1	59.4	
		Savings Plan	3,274	7,084	28.2	3.6	52,905	622.4	43,937	516.9	38,679	73.1	455.0	30,270	68.9	356.1	7,437	14.1	87.5	7,437	16.9	87.5	6,230	11.8	73.3	
		Traditional Plan	7,555	15,922	33.6	9.3	190,750	998.4	188,850	988.4	192,305	100.8	1,006.5	188,969	100.1	989.0	19,288	10.1	101.0	19,288	10.2	101.0	(19,407)	-10.2	-101.6	
		Traditional Plus Plan	693	1,273	47.9	28.2	23,461	1,535.8	23,234	1,520.9	30,087	128.2	1,969.6	29,686	127.8	1,943.3	1,932	8.2	126.5	1,932	8.3	126.5	(8,385)	-35.7	-548.9	
		Consolidated	14,422	30,098	32.5	8.4	303,486	840.3	292,241	809.1	288,140	94.9	797.8	275,577	94.3	763.0	35,241	11.6	97.6	35,241	12.1	97.6	(18,576)	-6.1	-51.4	41.0
1441	Parmed Medical	Plan - 007	2,304	5,619	44.0	24.8	134,761	1,998.6	134,761	1,998.6	119,029	88.3	1,765.3	119,029	88.3	1,765.3	7,241	5.4	107.4	7,241	5.4	107.4	8,491	6.3	125.9	
	Aid Scheme	Consolidated	2,304	5,619	44.0	24.8	134,761	1,998.6	134,761	1,998.6	119,029	88.3	1,765.3	119,029	88.3	1,765.3	7,241	5.4	107.4	7,241	5.4	107.4	8,491	6.3	125.9	65.7
1515	PG Bison Medical	PG Bison	635	1,368	39.2	15.4	20,173	-	20,173	-	17,903	88.7	-	17,903	88.7	-	2,105	10.4	-	2,105	10.4	-	165	0.8	-	-
	Aid Society	Consolidated	635	1,368	39.2	15.4	20,173	1,228.9	20,173	1,228.9	17,903	88.7	1,090.6	17,903	88.7	1,090.6	2,105	10.4	128.2	2,105	10.4	128.2	165	0.8	10.0	136.2
1186	PG Group	PG Group Medical	1,239	2,641	34.5	12.8	43,972	1,387.5	33,104	1,044.6	38,320	87.1	1,209.1	29,536	89.2	932.0	3,042	6.9	96.0	3,042	9.2	96.0	527	1.2	16.6	
	Medical Scheme	Consolidated	1,239	2,641	34.5	12.8	43,972	1,387.5	33,104	1,044.6	38,320	87.1	1,209.1	29,536	89.2	932.0	3,042	6.9	96.0	3,042	9.2	96.0	527	1.2	16.6	110.3
1563	Pick & Pay	Pick & Pay Medical	7,695	16,324	28.8	3.1	179,993	918.9	135,118	689.8	149,607	83.1	763.7	108,743	80.5	555.1	18,507	10.3	94.5	18,507	13.7	94.5	7,868	4.4	40.2	
	Medical Scheme	Consolidated	7,695	16,324	28.8	3.1	179,993	918.9	135,118	689.8	149,607	83.1	763.7	108,743	80.5	555.1	18,507	10.3	94.5	18,507	13.7	94.5	7,868	4.4	40.2	81.1
1583	Platinum Health	Basic Option	8,102	8,637	38.5	-	41,901	404.3	41,901	404.3	33,872	80.8	326.8	33,872	80.8	326.8	4,318	10.3	41.7	4,318	10.3	41.7	3,712	8.9	35.8	

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

Ref no.	Name of medical scheme	Name of benefit option	Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution		Risk Contribution		Gross relevant healthcare			Net relevant healthcare			Gross non-healthcare			Net non-healthcare			Net healthcare			Solvency
			As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm	R'000	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	2009 %
Registered schemes: restricted continued																										
1583	Platinum Health	Enhanced Option	23,696	46,610	29.5	2.8	282,830	505.7	282,830	505.7	331,506	117.2	592.7	331,506	117.2	592.7	23,308	8.2	41.7	23,308	8.2	41.7	(71,984)	-25.5	-128.7	
	continued	Other*	-	-	-	-	52	-	39	-	18	34.1	-	13	34.2	-	2	3.0	-	2	4.0	-	24	46.4	-	
		Consolidated	31,798	55,247	30.9	2.3	324,783	489.9	324,770	489.9	365,396	112.5	551.2	365,391	112.5	551.1	27,627	8.5	41.7	27,627	8.5	41.7	(68,248)	-21.0	-102.9	32.0
1194	Profmed	Pro Active	9,811	27,185	32.9	5.1	172,791	529.7	172,791	529.7	88,069	51.0	270.0	88,069	51.0	270.0	35,726	20.7	109.5	35,726	20.7	109.5	48,996	28.4	150.2	
		Pro Active Plus	2,743	6,108	31.4	4.3	42,362	578.0	42,362	578.0	32,596	76.9	444.7	32,596	76.9	444.7	9,231	21.8	125.9	9,231	21.8	125.9	535	1.3	7.3	
		Pro Pinnacle	2,623	5,683	48.8	25.8	150,499	2,206.9	150,499	2,206.9	166,646	110.7	2,443.6	166,646	110.7	2,443.6	9,627	6.4	141.2	9,627	6.4	141.2	(25,774)	-17.1	-377.9	
		Pro Secure	7,230	18,344	39.6	13.0	228,435	1,037.7	228,435	1,037.7	240,914	105.5	1,094.4	240,914	105.5	1,094.4	26,138	11.4	118.7	26,138	11.4	118.7	(38,617)	-16.9	-175.4	
		Pro Secure Plus	2,139	4,674	41.7	16.3	71,468	1,274.2	71,468	1,274.2	82,637	115.6	1,473.3	82,637	115.6	1,473.3	7,582	10.6	135.2	7,582	10.6	135.2	(18,751)	-26.2	-334.3	
		Consolidated	24,546	61,994	36.8	10.1	665,555	894.6	665,555	894.6	610,862	91.8	821.1	610,862	91.8	821.1	88,304	13.3	118.7	88,304	13.3	118.7	(33,611)	-5.1	-45.2	45.1
1516	Quantum Medical	Essential Comprehensive	878	1,781	41.4	17.4	29,524	1,381.5	24,380	1,140.8	35,473	120.1	1,659.8	30,104	123.5	1,408.6	2,355	8.0	110.2	2,355	9.7	110.2	(8,079)	-27.4	-378.0	
	Aid Society	Essential Saver	5,380	11,374	29.7	5.4	86,353	632.7	70,980	520.0	74,586	86.4	546.5	58,617	82.6	429.5	14,125	16.4	103.5	14,125	19.9	103.5	(1,762)	-2.0	-12.9	
		Keycare Plus	690	1,355	24.1	1.3	7,283	447.9	7,283	447.9	6,943	95.3	427.0	6,943	95.3	427.0	1,644	22.6	101.1	1,644	22.6	101.1	(1,304)	-17.9	-80.2	
		Consolidated	6,948	14,510	30.6	6.5	123,161	707.3	102,644	589.5	117,002	95.0	672.0	95,665	93.2	549.4	18,124	14.7	104.1	18,124	17.7	104.1	(11,145)	-9.0	-64.0	114.6
1201	Rand Water	Option A	2,511	6,823	29.7	6.8	86,275	1,053.7	86,275	1,053.7	88,430	102.5	1,080.0	88,430	102.5	1,080.0	5,745	6.7	70.2	5,745	6.7	70.2	(7,900)	-9.2	-96.5	
	Medical Scheme	Option B	389	397	44.9	-	3,114	653.7	3,114	653.7	2,874	92.3	603.3	2,874	92.3	603.3	168	5.4	35.2	168	5.4	35.2	72	2.3	15.1	
		Consolidated	2,900	7,220	30.6	6.4	89,389	1,031.7	89,389	1,031.7	91,304	102.1	1,053.8	91,304	102.1	1,053.8	5,913	6.6	68.2	5,913	6.6	68.2	(7,828)	-8.8	-90.3	95.9
1430	Remedi Medical	Classic	5,491	11,303	27.1	3.5	136,168	1,003.9	136,168	1,003.9	93,878	68.9	692.1	93,878	68.9	692.1	11,496	8.4	84.8	11,496	8.4	84.8	30,795	22.6	227.0	
	Aid Scheme	Comprehensive	7,368	18,149	32.8	6.2	273,478	1,255.7	232,651	1,068.2	280,953	102.7	1,290.0	245,859	105.7	1,128.9	16,759	6.1	77.0	16,759	7.2	77.0	(29,967)	-11.0	-137.6	
		Standard	2,625	6,268	25.7	1.2	41,084	546.2	41,084	546.2	32,514	79.1	432.3	32,514	79.1	432.3	4,686	11.4	62.3	4,686	11.4	62.3	3,884	9.5	51.6	
		Consolidated	15,484	35,720	29.8	4.5	450,730	1,051.5	409,903	956.3	407,345	90.4	950.3	372,251	90.8	868.4	32,941	7.3	76.8	32,941	8.0	76.8	4,711	1.0	11.0	49.2
1176	Retail Medical Scheme	Essential Comprehensive Option	369	733	50.9	29.6	20,455	2,325.5	16,424	1,867.3	22,904	112.0	2,603.9	19,051	116.0	2,165.9	947	4.6	107.7	947	5.8	107.7	(3,574)	-17.5	-406.4	
		Essential Option	5,212	9,727	26.4	0.7	51,088	437.7	51,088	437.7	28,782	56.3	246.6	28,782	56.3	246.6	11,926	23.3	102.2	11,926	23.3	102.2	10,380	20.3	88.9	
		Essential Plus Option	1,370	2,660	42.8	22.0	40,786	1,277.8	33,014	1,034.3	39,954	98.0	1,251.7	32,194	97.5	1,008.6	3,477	8.5	108.9	3,477	10.5	108.9	(2,658)	-6.5	-83.3	
		Consolidated	6,951	13,120	31.1	6.6	112,329	713.5	100,526	638.5	91,639	81.6	582.1	80,027	79.6	508.3	16,351	14.6	103.9	16,351	16.3	103.9	4,148	3.7	26.3	98.5
1013	Rhodes University	RUMED	1,004	2,164	39.0	14.3	23,181	892.7	23,181	892.7	20,901	90.2	804.9	20,901	90.2	804.9	2,208	9.5	85.0	2,208	9.5	85.0	72	0.3	2.8	
	Medical Scheme	Consolidated	1,004	2,164	39.0	14.3	23,181	892.7	23,181	892.7	20,901	90.2	804.9	20,901	90.2	804.9	2,208	9.5	85.0	2,208	9.5	85.0	72	0.3	2.8	93.1
1209	SA Breweries	Castellion Option	2,956	6,936	25.6	0.9	40,404	485.4	40,404	485.4	37,378	92.5	449.1	37,378	92.5	449.1	6,466	16.0	77.7	6,466	16.0	77.7	(3,440)	-8.5	-41.3	
	Medical Aid Society	SAB Option	6,479	14,578	29.9	5.6	186,373	1,065.4	167,717	958.7	164,799	88.4	942.1	149,750	89.3	856.0	16,157	8.7	92.4	16,157	9.6	92.4	1,810	1.0	10.3	
		Consolidated	9,435	21,514	28.5	4.1	226,778	878.4	208,122	806.1	202,177	89.2	783.1	187,128	89.9	724.8	22,624	10.0	87.6	22,624	10.9	87.6	(1,630)	-0.7	-6.3	87.5
1424	SABC Medical	SABC Plan 009	4,604	10,058	34.1	10.6	151,779	1,257.5	129,002	1,068.8	140,856	92.8	1,167.0	125,515	97.3	1,039.9	10,575	7.0	87.6	10,575	8.2	87.6	(7,088)	-4.7	-58.7	
	Aid Scheme	Consolidated																								

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio	
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm	R'000	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	R'000	As % of RCI	pbpm	R'000	As % of GCI	pbpm	2009 %	
Registered schemes:																											
restricted continued																											
1038	SAMWUMed	Option A	16,884	40,324	31.9	5.2	229,804	474.9	229,804	474.9	177,425	77.2	366.7	177,425	77.2	366.7	21,543	9.4	44.5	21,543	9.4	44.5	30,837	13.4	63.7		
		Option B	13,387	32,760	28.2	2.0	257,621	655.3	257,621	655.3	213,891	83.0	544.1	213,891	83.0	544.1	17,085	6.6	43.5	17,085	6.6	43.5	26,646	10.3	67.8		
		Consolidated	30,271	73,084	30.2	3.8	487,426	555.8	487,426	555.8	391,316	80.3	446.2	391,316	80.3	446.2	38,627	7.9	44.0	38,627	7.9	44.0	57,482	11.8	65.5	59.8	
1527	Sappi Medical Aid Scheme	Sappi Medical Aid Scheme	4,086	9,443	36.0	12.6	139,360	1,229.8	117,185	1,034.1	132,226	94.9	1,166.9	112,001	95.6	988.4	9,767	7.0	86.2	9,767	8.3	86.2	(4,583)	-3.3	-40.4		
		Consolidated	4,086	9,443	36.0	12.6	139,360	1,229.8	117,185	1,034.1	132,226	94.9	1,166.9	112,001	95.6	988.4	9,767	7.0	86.2	9,767	8.3	86.2	(4,583)	-3.3	-40.4	42.8	
		Sasolmed	28,227	74,603	30.4	4.7	936,305	1,045.9	936,305	1,045.9	846,039	90.4	945.0	846,039	90.4	945.0	65,626	7.0	73.3	65,626	7.0	73.3	24,640	2.6	27.5		
1234	Sasolmed	Consolidated	28,227	74,603	30.4	4.7	936,305	1,045.9	936,305	1,045.9	846,039	90.4	945.0	846,039	90.4	945.0	65,626	7.0	73.3	65,626	7.0	73.3	24,640	2.6	27.5	46.7	
		Sedmed	865	2,023	44.4	25.0	17,918	738.1	17,918	738.1	17,563	98.0	723.5	17,563	98.0	723.5	585	3.3	24.1	585	3.3	24.1	(230)	-1.3	-9.5		
		Consolidated	865	2,023	44.4	25.0	17,918	738.1	17,918	738.1	17,563	98.0	723.5	17,563	98.0	723.5	585	3.3	24.1	585	3.3	24.1	(230)	-1.3	-9.5	69.2	
1243	Siemens Medical Scheme	Siemens Medical Scheme	2,965	6,744	33.0	7.9	96,678	1,194.6	72,539	896.3	91,731	94.9	1,133.5	75,484	104.1	932.7	8,159	8.4	100.8	8,159	11.2	100.8	(11,104)	-11.5	-137.2		
		Consolidated	2,965	6,744	33.0	7.9	96,678	1,194.6	72,539	896.3	91,731	94.9	1,133.5	75,484	104.1	932.7	8,159	8.4	100.8	8,159	11.2	100.8	(11,104)	-11.5	-137.2	52.0	
		Option A	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1589	Solvita Medical Scheme	Option B	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Consolidated	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Consolidated	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1580	South African Police Service Medical Scheme (POLMED)	Higher Plan	89,118	279,508	27.9	3.5	3,088,595	920.8	3,088,595	920.8	3,159,941	102.3	942.1	3,159,941	102.3	942.1	170,509	5.5	50.8	170,509	5.5	50.8	(241,856)	-7.8	-72.1		
		Lower Plan	79,458	192,805	22.1	0.7	1,193,870	516.0	1,193,870	516.0	1,063,880	89.1	459.8	1,063,880	89.1	459.8	127,063	10.6	54.9	127,063	10.6	54.9	2,927	0.2	1.3		
		Consolidated	168,576	472,313	25.5	2.3	4,282,465	755.6	4,282,465	755.6	4,223,821	98.6	745.2	4,223,821	98.6	745.2	297,572	6.9	52.5	297,572	6.9	52.5	(238,929)	-5.6	-42.2	29.2	
1254	Stocksmed	Stocksmed	860	1,846	34.6	6.9	27,687	1,249.8	20,766	937.4	28,390	102.5	1,281.6	22,977	110.6	1,037.2	2,682	9.7	121.1	2,682	12.9	121.1	(4,893)	-17.7	-220.9		
		Consolidated	860	1,846	34.6	6.9	27,687	1,249.8	20,766	937.4	28,390	102.5	1,281.6	22,977	110.6	1,037.2	2,682	9.7	121.1	2,682	12.9	121.1	(4,893)	-17.7	-220.9	92.4	
		Consolidated	860	1,846	34.6	6.9	27,687	1,249.8	20,766	937.4	28,390	102.5	1,281.6	22,977	110.6	1,037.2	2,682	9.7	121.1	2,682	12.9	121.1	(4,893)	-17.7	-220.9	92.4	
1544	Tiger Brands Medical Scheme	Option I	4,972	11,482	38.3	16.2	155,517	1,128.7	155,517	1,128.7	151,806	97.6	1,101.8	151,806	97.6	1,101.8	11,622	7.5	84.4	11,622	7.5	84.4	(7,911)	-5.1	-57.4		
		Consolidated	4,972	11,482	38.3	16.2	155,517	1,128.7	155,517	1,128.7	151,806	97.6	1,101.8	151,806	97.6	1,101.8	11,622	7.5	84.4	11,622	7.5	84.4	(7,911)	-5.1	-57.4	51.6	
		Consolidated	4,972	11,482	38.3	16.2	155,517	1,128.7	155,517	1,128.7	151,806	97.6	1,101.8	151,806	97.6	1,101.8	11,622	7.5	84.4	11,622	7.5	84.4	(7,911)	-5.1	-57.4	51.6	
1582	Transmed Medical Fund	Guardian	18,322	23,686	74.7	85.5	258,839	910.7	258,839	910.7	402,399	155.5	1,415.7	402,399	155.5	1,415.7	31,842	12.3	112.0	31,842	12.3	112.0	(175,402)	-67.8	-617.1		
		Private Cover	16,637	33,297	43.9	13.3	575,871	1,441.2	490,726	1,228.2	550,546	95.6	1,377.9	463,800	94.5	1,160.8	54,940	9.5	137.5	54,940	11.2	137.5	(28,014)	-4.9	-70.1		
		Plus Savings																									
		State Plus Network	6,797	16,550	33.8	5.3	53,131	267.5	53,131	267.5	52,672	99.1	265.2	52,672	99.1	265.2	6,232	11.7	31.4	6,232	11.7	31.4	(5,773)	-10.9	-29.1		
		State Plus Own Choice	31,767	70,753	35.2	9.9	285,725	336.5	285,725	336.5	268,770	94.1	316.6	268,770	94.1	316.6	37,406	13.1	44.1	37,406	13.1	44.1	(20,451)	-7.2	-24.1		
		Ubuntu	-	-	-	-	115,657	-	115,657	-	93,489	80.8	-	93,489	80.8	-	11,745	10.2	-	11,745	10.2	-	10,423	9.0	-		
		Consolidated	73,523	144,286	43.6	22.6	1,289,223	744.6	1,204,078	695.4	1,367,876	106.1	790.0	1,281,130	106.4	739.9	142,165	11.0	82.1	142,165	11.8	82.1	(219,217)	-17.0	-126.6	28.9	
1579	Tsogo Sun Group Medical Scheme	Classic Comprehensive	1,373	3,191	28.6	4.1	38,543	1,006.6	29,973	782.7	37,789	98.0	986.9	29,755	99.3	777.1	4,055	10.5	105.9	4,055	13.5	105.9	(3,838)	-10.0	-100.2		
		Classic Saver	1,708	3,291	23.2	0.2	25,979	657.8	19,569	495.5	16,641	64.1	421.4	10,833	55.4	274.3	4,569	17.6	115.7	4,569	23.3	115.7	4,167	16.0	105.5		
		Consolidated	3,081	6,482	25.9	2.1	64,522	829.5	49,542	636.9	54,430	84.4	699.8	40,588	81.9	521.8	8,624	13.4	110.9	8,624	17.4	110.9	329	0.5	4.2	74.7	

## Annexure O: Detailed financial information per option: registered schemes for the year ended 31 December 2009

			Members	Bene- ficiaries	Average age pb	Pensioner ratio (65+ years)	Gross Contribution Income (GCI)		Risk Contribution Income (RCI)		Gross relevant healthcare expenditure incurred (incl. PMSA & managed healthcare claims)			Net relevant healthcare expenditure incurred (incl. managed healthcare claims)			Gross non-healthcare expenses (incl. PMSA)			Net non-healthcare expenses			Net healthcare results			Solvency ratio
Ref no.	Name of medical scheme	Name of benefit option	As at: 31.12.2009	As at: 31.12.2009	Years	%	R'000	pbpm R	R'000	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	R'000	As % of RCI	pbpm R	R'000	As % of GCI	pbpm R	2009 %
Registered schemes:																										
restricted continued																										
1434	Umed	Classic - Previous Option 2	6,292	14,451	43.5	15.3	240,126	1,384.7	240,126	1,384.7	227,313	94.7	1,310.8	227,313	94.7	1,310.8	19,579	8.2	112.9	19,579	8.2	112.9	(6,765)	-2.8	-39.0	
		Value - Previous Option 1	1,724	4,132	31.7	5.8	30,295	611.0	30,295	611.0	23,368	77.1	471.3	23,368	77.1	471.3	6,234	20.6	125.7	6,234	20.6	125.7	693	2.3	14.0	
		Consolidated	8,016	18,583	40.9	13.2	270,421	1,212.7	270,421	1,212.7	250,680	92.7	1,124.1	250,680	92.7	1,124.1	25,813	9.5	115.8	25,813	9.5	115.8	(6,072)	-2.2	-27.2	46.6
1597	Umvuzo Health Medical Scheme	Standard	5,771	14,844	27.9	0.6	82,155	461.2	82,155	461.2	65,592	79.8	368.2	65,410	79.6	367.2	14,560	17.7	81.7	14,560	17.7	81.7	2,185	2.7	12.3	
		Supreme	1,245	3,052	26.0	0.4	19,708	538.1	19,708	538.1	17,359	88.1	474.0	17,359	88.1	474.0	3,103	15.7	84.7	3,103	15.7	84.7	(754)	-3.8	-20.6	
		Ultra Affordable	9,792	13,688	33.0	0.2	67,187	409.0	67,187	409.0	55,840	83.1	340.0	55,829	83.1	339.9	11,303	16.8	68.8	11,303	16.8	68.8	55	0.1	0.3	
		Consolidated	16,808	31,584	30.0	0.4	169,050	446.0	169,050	446.0	138,791	82.1	366.2	138,598	82.0	365.7	28,966	17.1	76.4	28,966	17.1	76.4	1,486	0.9	3.9	14.5
1520	University of Kwa-Zulu Natal Medical Scheme	Savings Plus Plan	3,331	7,188	37.5	13.5	81,216	941.6	60,929	706.4	76,069	93.7	881.9	59,473	97.6	689.5	9,595	11.8	111.2	9,595	15.7	111.2	(8,139)	-10.0	-94.4	
		Consolidated	3,331	7,188	37.5	13.5	81,216	941.6	60,929	706.4	76,069	93.7	881.9	59,473	97.6	689.5	9,595	11.8	111.2	9,595	15.7	111.2	(8,139)	-10.0	-94.4	77.1
1282	University of the Witwatersrand Staff Medical Aid Scheme	University of Witwatersrand Staff Medical Aid	3,031	6,340	38.6	14.2	95,734	1,258.3	95,734	1,258.3	92,458	96.6	1,215.3	92,458	96.6	1,215.3	8,347	8.7	109.7	8,347	8.7	109.7	(5,071)	-5.3	-66.6	
		Consolidated	3,031	6,340	38.6	14.2	95,734	1,258.3	95,734	1,258.3	92,458	96.6	1,215.3	92,458	96.6	1,215.3	8,347	8.7	109.7	8,347	8.7	109.7	(5,071)	-5.3	-66.6	58.1
1291	Witbank Coalfields Medical Aid Scheme	Comprehensive option	7,443	19,020	30.0	5.4	236,891	1,037.9	173,156	758.7	209,320	88.4	917.1	154,072	89.0	675.0	10,705	4.5	46.9	10,705	6.2	46.9	8,378	3.5	36.7	
		Yebomed	3,017	6,985	27.6	0.1	27,739	330.9	27,739	330.9	24,270	87.5	289.5	24,270	87.5	289.5	2,082	7.5	24.8	2,082	7.5	24.8	1,387	5.0	16.5	
		Consolidated	10,460	26,005	29.4	4.0	264,630	848.0	200,895	643.8	233,590	88.3	748.5	178,342	88.8	571.5	12,788	4.8	41.0	12,788	6.4	41.0	9,765	3.7	31.3	106.7
1293	Wooltru Healthcare Fund	Core Option	662	1,213	27.9	3.8	7,136	490.2	7,136	490.2	6,473	90.7	444.7	6,473	90.7	444.7	781	10.9	53.6	781	10.9	53.6	(118)	-1.7	-8.1	
		Extended Option	978	2,114	37.8	14.2	32,268	1,272.0	32,268	1,272.0	34,926	108.2	1,376.8	34,926	108.2	1,376.8	2,155	6.7	84.9	2,155	6.7	84.9	(4,813)	-14.9	-189.7	
		Plus Option	7,236	14,936	27.4	2.9	126,881	707.9	126,881	707.9	117,601	92.7	656.1	117,601	92.7	656.1	16,782	13.2	93.6	16,782	13.2	93.6	(7,502)	-5.9	-41.9	
		Consolidated	8,876	18,263	28.6	4.3	166,285	758.8	166,285	758.8	159,001	95.6	725.5	159,001	95.6	725.5	19,717	11.9	90.0	19,717	11.9	90.0	(12,433)	-7.5	-56.7	85.8
1253	Xstrata Medical Aid Scheme	107	7,838	23,138	32.8	0.2	150,061	540.5	150,061	540.5	150,316	100.2	541.4	150,316	100.2	541.4	15,340	10.2	55.2	15,340	10.2	55.2	(15,595)	-10.4	-56.2	
		Consolidated	7,838	23,138	32.8	0.2	150,061	540.5	150,061	540.5	150,316	100.2	541.4	150,316	100.2	541.4	15,340	10.2	55.2	15,340	10.2	55.2	(15,595)	-10.4	-56.2	35.9
Sub-total: registered restricted schemes			1,343,640	3,253,171	29.7	5.3	30,509,043	781.5	28,956,492	741.8	28,633,583	93.9	733.5	27,198,658	93.9	696.7	2,678,079	8.8	68.6	2,678,079	9.2	68.6	(920,245)	-3.0	-23.6	42.5
Total registered schemes																										
			3,488,009	8,068,505	31.6	6.5	84,863,217	876.5	77,131,683	796.6	76,308,352	89.9	788.1	68,903,198	89.3	711.6	10,816,245	12.7	111.7	10,816,245	14.0	111.7	(2,587,760)	-3.0	-26.7	32.9



**Annexure O:** Detailed financial information per option: registered schemes for the year ended 31 December 2009

**Notes**

PMSA = Personal Medical Savings Account

pb = per beneficiary

pbpm = per beneficiary per month

RCI = Risk Contribution Income

GCI = Gross Contribution Income

Net relevant healthcare expenditure incurred (incl. managed healthcare claims) includes risk transfer arrangements.

\* Discontinued options: these options did not have any members at year-end, therefore the pmpm figures, the average age, and pensioner ratios could not be calculated.

- The scheme liquidated in 2009. Figures were submitted.
- Purehealth Medical Scheme was liquidated with effect from 31 December 2009.
- Stocksmed was liquidated with effect from 31 December 2009.

- The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.



## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

			Managed healthcare: management services				Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)							
Ref no.	Name of medical scheme	Name of administrator	Administrator R'000	Other 3rd parties R'000	Administrator pabpm R	Administrator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth
<b>Registered schemes: open</b>																														
1252	Bestmed Medical Scheme	Sanlam Healthcare Management (Pty) Ltd	23,623	1,177	22.2	50.1	73,399	72,266	1.6	59.1	71.1	-16.9	68.9	70.2	-1.9	155.6	168.2	-7.5	97,022	78.1	91.1	205.6	124,189	101,582	22.3	12.0	11.4	116.6	98.6	18.3
1512	Bonitas Medical Fund	Medscheme Holdings (Pty) Ltd	183,990	-	23.9	55.9	388,176	322,890	20.2	68.1	71.7	-5.0	50.4	45.2	11.5	117.9	107.5	9.7	572,166	100.3	74.3	173.8	570,286	450,636	26.6	9.2	8.8	74.1	63.1	17.4
1034	Cape Medical Plan	Self-administered	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	16,428	16,620	-1.2	13.5	14.5	89.0	86.6	2.8
1552	Community Medical Aid Scheme (COMMED)	Allcare Administrators (Pty) Ltd	-	9,594	-	-	36,075	30,822	17.0	66.9	60.9	9.9	87.8	86.6	1.4	213.6	223.5	-4.4	36,075	66.9	87.8	213.6	53,902	50,599	6.5	14.3	18.7	131.2	142.2	-7.7
1491	Compcare Wellness Medical Scheme	Status Medical Aid Administrators (Pty) Ltd	-	14,072	-	-	39,846	49,717	-19.9	87.3	90.0	-3.0	104.3	120.1	-13.2	240.0	280.0	-14.3	39,846	87.3	104.3	240.0	45,637	55,217	-17.3	10.4	13.5	119.4	133.4	-10.5
1125	Discovery Health Medical Scheme	Discovery Health (Pty) Ltd	565,273	-	23.6	52.7	2,451,633	2,185,943	12.2	96.0	96.0	-	102.3	94.5	8.3	228.7	214.1	6.8	3,016,906	118.2	125.9	281.4	2,552,566	2,275,988	12.2	10.7	10.9	106.5	98.4	8.2
1202	Fedhealth Medical Scheme	Medscheme Holdings (Pty) Ltd	44,033	2,780	19.4	42.3	168,615	169,083	-0.3	74.7	82.3	-9.2	74.2	76.1	-2.5	161.9	172.5	-6.1	212,648	94.3	93.6	204.2	225,608	205,370	9.9	10.0	10.6	99.3	92.4	7.5
1554	Genesis Medical Scheme	Self-administered	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	19,272	17,578	9.6	11.8	10.9	75.5	63.2	19.5
1561	Gen-Health Medical Scheme	Sechaba Medical Solutions (Pty) Ltd	-	7,127	-	-	14,312	10,169	40.7	46.0	39.9	15.3	42.1	32.9	28.0	102.0	80.1	27.3	14,312	46.0	42.1	102.0	31,113	25,466	22.2	12.7	13.2	91.5	82.3	11.2
1466	Good Hope Medical Aid Society	Status Medical Aid Administrators (Pty) Ltd	-	327	-	-	2,946	2,862	2.9	77.0	76.5	0.7	28.0	25.0	12.0	72.3	70.0	3.3	2,946	77.0	28.0	72.3	3,825	3,741	2.2	9.6	10.0	36.3	32.7	11.0
1537	Hosmed Medical Aid Scheme	Allcare Administrators (Pty) Ltd	18,156	-	16.5	49.4	66,490	63,063	5.4	58.3	65.0	-10.3	60.3	52.6	14.6	180.9	172.5	4.9	84,646	74.3	76.8	230.3	114,001	97,025	17.5	13.6	12.3	103.4	81.0	27.7
1556	Humanity Medical Scheme	Allcare Administrators (Pty) Ltd	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1577	Ingwe Health Plan	Momentum Medical Scheme Administrators (Pty) Ltd	5,998	-	20.1	29.0	12,627	15,870	-20.4	65.8	70.2	-6.3	42.4	44.2	-4.1	61.1	70.4	-13.2	18,625	97.1	62.5	90.1	19,186	22,618	-15.2	12.4	13.0	64.4	63.0	2.2
1087	Keyhealth	Momentum Medical Scheme Administrators (Pty) Ltd	14,656	13,147	11.5	26.7	92,053	94,911	-3.0	75.4	74.3	1.5	72.5	62.9	15.3	167.8	149.5	12.2	106,709	87.4	84.0	194.5	122,047	127,762	-4.5	8.0	8.3	96.1	84.7	13.5
1576	Liberty Health Medical Scheme	V Med Administrators (Pty) Ltd	25,807	-	22.6	48.3	71,317	74,876	-4.8	64.8	67.9	-4.6	62.6	61.8	1.3	133.5	133.0	0.4	97,123	88.3	85.2	181.8	109,973	110,265	-0.3	10.2	10.5	96.5	91.0	6.0

## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

Managed healthcare: management services						Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)									
Ref no.	Name of medical scheme	Name of administrator	Administrator R'000	Other 3rd parties R'000	Administrator pabpm R	Administrator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	
Registered schemes: open continued																															
1549	Medicover	V Med Administrators (Pty) Ltd	24,129	5,386	18.3	45.7	62,357	-	100.0	79.3	-	100.0	47.4	-	100.0	118.0	-	100.0	86,486	110.0	65.7	163.7	78,606	71,667	9.7	7.9	6.8	59.8	42.3	41.4	
1149	Medihelp	Self-administered	-	52,633	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	267,975	239,821	11.7	8.3	8.4	104.7	110.4	-5.2	
1506	Medimed Medical Scheme	Providence Healthcare Risk Managers (Pty) Ltd	1,286	-	9.3	24.4	5,859	6,474	-9.5	86.6	88.1	-1.7	42.3	42.8	-1.2	111.1	113.2	-1.9	7,145	105.6	51.6	135.4	6,768	7,351	-7.9	7.4	8.2	48.9	48.6	0.6	
1140	Medshield Medical Scheme	Self-administered	-	40,665	-	-	22,507	118,404	-81.0	15.8	69.2	-77.2	10.7	58.4	-81.7	25.5	143.8	-82.3	22,507	15.8	10.7	25.5	142,679	171,152	-16.6	9.6	13.0	67.7	84.4	-19.8	
1167	Momentum Health	Momentum Medical Scheme Administrators (Pty) Ltd	45,908	2,751	21.5	47.6	172,817	162,783	6.2	96.0	96.2	-0.2	81.0	78.4	3.3	179.3	175.1	2.4	218,725	121.5	102.5	227.0	180,039	169,210	6.4	9.5	10.3	84.4	81.5	3.6	
1166	National Independent Medical Aid Society (NIMAS)	Metropolitan Health Corporate (Pty) Ltd	-	5,934	-	-	22,104	22,906	-3.5	84.4	80.7	4.6	58.4	48.6	20.2	126.7	111.0	14.1	22,104	84.4	58.4	126.7	26,192	28,392	-7.7	7.6	8.3	69.2	60.2	15.0	
1560	Openplan Medical Scheme	Metropolitan Health (Pty) Ltd	-	-	-	-	-	13,512	-100.0	-	61.6	-100.0	-	61.9	-100.0	-	126.3	-100.0	-	-	-	-	-	21,918	-100.0	-	9.7	-	100.4	-100.0	
1215	Oxygen Medical Scheme	Medscheme Holdings (Pty) Ltd	19,843	11,746	11.3	26.0	105,904	124,372	-14.8	71.5	86.9	-17.7	60.4	59.6	1.3	138.9	138.8	0.1	125,747	84.9	71.8	165.0	148,061	143,083	3.5	9.7	9.1	84.5	68.6	23.2	
1587	Pathfinder Medical Scheme	Agility Global Health Solutions Africa	-	-	-	-	-	1,950	-100.0	-	45.4	-100.0	-	52.6	-100.0	-	99.8	-100.0	-	-	-	-	-	4,298	-100.0	-	19.2	-	116.0	-100.0	
1546	Pharos Medical Plan	Private Health Administrators (a division of Sweidan Trust (Pty) Ltd)	3,833	498	18.6	43.3	19,069	17,781	7.2	67.1	65.8	2.0	92.4	82.5	12.0	215.3	192.1	12.1	22,902	80.6	111.0	258.6	28,420	27,028	5.2	13.6	13.7	137.8	125.5	9.8	
1454	Pro Sano Medical Scheme	Sigma Health Fund Managers (Pty) Ltd	-	18,713	-	-	41,677	39,041	6.8	56.1	56.3	-0.4	49.0	44.4	10.4	111.2	104.8	6.1	41,677	56.1	49.0	111.2	74,293	69,316	7.2	9.5	9.6	87.4	78.8	10.9	
1196	Protea Medical Aid Society	Status Medical Aid Administrators (Pty) Ltd	208	1,262	2.6	3.0	4,769	3,796	25.6	64.1	71.0	-9.7	58.7	66.1	-11.2	69.1	84.8	-18.5	4,977	66.9	61.3	72.1	7,437	5,344	39.2	15.4	13.4	91.5	93.0	-1.6	
1170	Purehealth Medical Scheme	Eternity Private Health Fund Administrators (Pty) Ltd	-	2,545	-	-	7,308	10,893	-32.9	63.4	72.9	-13.0	89.0	92.0	-3.3	184.3	199.8	-7.8	7,308	63.4	89.0	184.3	11,531	14,949	-22.9	8.6	9.2	140.4	126.3	11.2	
1586	Renaissance Health Medical Scheme	Prosperity Health Managers (Pty) Ltd	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	

## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

			Managed healthcare: management services				Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)							
Ref no.	Name of medical scheme	Name of administrator	Administrator R'000	Other 3rd parties R'000	Administrator pabpm R	Administrator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth
<b>Registered schemes: open continued</b>																														
1575	Resolution Health Medical Scheme	Agility Global Health Solutions Africa	24,811	7,722	25.7	57.2	78,620	83,518	-5.9	71.4	75.2	-5.1	81.5	74.8	9.0	181.2	168.9	7.3	103,432	93.9	107.2	238.4	110,183	111,018	-0.8	17.8	17.4	114.2	99.5	14.8
1446	Selfmed Medical Scheme	V Med Administrators (Pty) Ltd	-	5,185	-	-	12,892	13,031	-1.1	35.4	38.5	-8.1	43.2	39.6	9.1	91.8	86.9	5.6	12,892	35.4	43.2	91.8	36,447	33,886	7.6	12.5	12.2	122.0	103.0	18.4
1486	Sizwe Medical Fund	Sechaba Medical Solutions (Pty) Ltd	33,225	981	17.3	43.9	113,603	108,107	5.1	70.2	69.1	1.6	59.1	54.7	8.0	150.0	140.2	7.0	146,828	90.7	76.3	193.9	161,813	156,363	3.5	10.3	10.7	84.1	79.1	6.3
1141	Spectramed	Medscheme Holdings (Pty) Ltd	523	17,771	0.3	0.8	65,176	98,229	-33.6	46.0	61.4	-25.1	43.6	50.4	-13.5	97.8	118.3	-17.3	65,699	46.4	44.0	98.6	141,653	159,948	-11.4	9.7	10.3	94.8	82.0	15.6
1464	Suremed Health	Providence Healthcare Risk Managers (Pty) Ltd	327	465	7.3	17.3	2,468	2,104	17.3	51.3	50.9	0.8	54.9	50.0	9.8	130.9	119.3	9.7	2,795	58.1	62.2	148.3	4,810	4,134	16.4	11.8	11.3	107.1	98.2	9.1
1147	Telemed	Self-administered	-	18,590	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	74,201	65,130	13.9	7.7	7.1	114.1	89.2	27.9
1592	Thebemed	Thebe Ya Bophelo Healthcare Administrators (Pty) Ltd	2,857	997	16.0	53.5	7,242	8,202	-11.7	79.2	80.2	-1.2	40.7	31.6	28.8	135.5	103.1	31.4	10,099	110.5	56.7	189.0	9,138	10,229	-10.7	10.8	9.7	51.3	39.5	29.9
1422	Topmed Medical Scheme	Momentum Medical Scheme Administrators (Pty) Ltd	6,004	1,887	18.7	40.0	20,978	19,342	8.5	63.6	63.6	-	65.4	61.3	6.7	139.8	133.3	4.9	26,982	81.8	84.2	179.8	32,968	30,398	8.5	11.1	11.2	102.8	96.3	6.7
<b>Sub-total: registered open schemes</b>			1,044,491	243,956	21.2	48.1	4,182,837	3,946,917	6.0	80.9	84.1	-3.8	77.0	74.0	4.1	175.3	171.7	2.1	5,227,328	101.0	96.2	219.1	5,551,246	5,105,100	8.7	9.4	10.4	95.8	87.4	9.6
<b>Registered schemes: restricted</b>																														
1005	AECI Medical Aid Society	Medscheme Holdings (Pty) Ltd	6,319	-	33.6	71.3	13,741	12,650	8.6	90.7	88.8	2.1	73.1	65.3	11.9	155.1	141.3	9.8	20,060	132.4	106.7	226.4	15,150	14,242	6.4	6.5	6.8	80.6	73.5	9.7
1487	Afrisam SA Medical Scheme	Discovery Health (Pty) Ltd	897	-	28.6	61.8	2,654	2,273	16.8	69.8	71.7	-2.6	84.7	61.8	37.1	183.0	138.7	31.9	3,551	93.3	113.3	244.8	3,804	3,172	19.9	9.8	7.5	121.4	86.3	40.7
1567	Afrox Medical Aid Society	Metropolitan Health Corporate (Pty) Ltd	-	1,202	-	-	5,866	4,935	18.9	82.1	81.3	1.0	61.6	53.2	15.8	142.3	125.9	13.0	5,866	82.1	61.6	142.3	7,147	6,067	17.8	8.8	8.6	75.0	65.4	14.7
1456	Alliance Midmed Medical Scheme	Momentum Medical Scheme Administrators (Pty) Ltd	1,055	355	18.0	46.5	3,675	3,556	3.4	83.1	82.6	0.6	62.7	58.9	6.5	161.9	148.6	9.0	4,730	106.9	80.7	208.4	4,425	4,305	2.8	8.1	8.1	75.5	71.3	5.9



## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

Managed healthcare: management services							Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)								
Ref no.	Name of medical scheme	Name of administrator	Administrator R'000	Other 3rd parties R'000	Administrator pabpm R	Administrator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	
Registered schemes: restricted continued																															
1534	Altron Medical Aid Scheme	Allcare Administrators (Pty) Ltd	-	1,478	-	-	12,154	13,434	-9.5	95.3	94.7	0.6	100.9	95.1	6.1	225.7	212.2	6.4	12,154	95.3	100.9	225.7	12,747	14,185	-10.1	9.7	10.1	105.8	100.4	5.4	
1012	Anglo Medical Scheme	Momentum Medical Scheme Administrators (Pty) Ltd	5,945	216	18.2	41.9	17,844	17,071	4.5	74.0	74.7	-0.9	54.6	47.7	14.5	125.6	113.2	11.0	23,789	98.6	72.8	167.5	24,118	22,852	5.5	6.1	6.0	73.8	63.8	15.7	
1571	Anglovaal Group Medical Scheme	Discovery Health (Pty) Ltd	2,780	-	26.3	54.1	8,773	7,813	12.3	80.5	80.9	-0.5	83.0	74.9	10.8	170.8	155.2	10.1	11,554	106.1	109.4	224.9	10,892	9,661	12.7	8.8	9.0	103.1	92.6	11.3	
1279	Bankmed	Metropolitan Health Corporate (Pty) Ltd	-	62,636	-	-	152,142	139,993	8.7	80.2	80.2	-	63.4	57.9	9.5	125.4	113.2	10.8	152,142	80.2	63.4	125.4	189,806	174,621	8.7	7.8	7.7	79.1	72.2	9.6	
1507	Barloworld Medical Scheme	Medscheme Holdings (Pty) Ltd	5,186	-	34.0	72.4	9,494	8,420	12.7	86.2	86.2	-	62.3	56.3	10.7	132.5	120.5	10.0	14,679	133.3	96.4	204.9	11,016	9,772	12.7	5.2	5.3	72.3	65.3	10.7	
1557	BHP Billiton SA Medical Scheme	Old Mutual Healthcare (Pty) Ltd	-	-	-	-	-	3,064	-100.0	-	54.9	-100.0	-	62.7	-100.0	-	136.0	-100.0	-	-	-	-	-	-	5,585	-100.0	-	14.3	-	114.3	-100.0
1115	Biz Health Medical Scheme	Status Medical Aid Administrators (Pty) Ltd	-	-	-	-	-	1,803	-100.0	-	79.3	-100.0	-	334.5	-100.0	-	544.8	-100.0	-	-	-	-	-	-	2,275	-100.0	-	17.6	-	421.9	-100.0
1526	BMW Employees Medical Aid Society	Medscheme Holdings (Pty) Ltd	1,678	-	22.5	62.2	3,229	3,377	-4.4	87.7	87.4	0.3	43.3	43.1	0.5	119.8	119.8	-	4,907	133.3	65.8	182.0	3,682	3,864	-4.7	5.5	6.1	49.4	49.3	0.2	
1237	BP Medical Aid Society	Metropolitan Health (Pty) Ltd	-	1,468	-	-	2,664	2,484	7.2	69.7	67.2	3.7	40.5	36.3	11.6	92.2	83.7	10.2	2,664	69.7	40.5	92.2	3,821	3,696	3.4	6.2	6.5	58.1	54.0	7.6	
1590	Building & Construction Industry Medical Aid Fund	Status Medical Aid Administrators (Pty) Ltd	-	694	-	-	6,368	5,388	18.2	84.6	85.2	-0.7	42.7	37.5	13.9	105.1	91.9	14.4	6,368	84.6	42.7	105.1	7,532	6,321	19.2	13.3	13.2	50.5	44.0	14.8	
1593	Built Environment Professional Associations Medical Scheme (BEPS)	Momentum Medical Scheme Administrators (Pty) Ltd	909	118	15.8	36.2	2,425	3,593	-32.5	84.6	89.5	-5.5	42.2	63.4	-33.4	96.8	147.1	-34.2	3,334	116.2	58.1	133.0	2,868	4,013	-28.5	5.2	8.1	49.9	70.8	-29.5	
1158	Cawmed Medical Scheme	Allcare Administrators (Pty) Ltd	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	Eternity Private Health Fund Administrators (Pty) Ltd	12,236	1,444	24.9	42.7	54,136	45,099	20.0	86.3	85.2	1.3	110.3	98.3	12.2	188.9	168.8	11.9	66,372	105.9	135.2	231.6	62,700	52,957	18.4	11.0	10.9	127.7	115.4	10.7	
1521	Clicks Group Medical Scheme	Medscheme Holdings (Pty) Ltd	350	-	17.1	35.0	1,142	1,809	-36.9	62.4	71.6	-12.8	55.8	49.3	13.2	114.0	102.7	11.0	1,492	81.6	72.9	149.0	1,829	2,526	-27.6	14.4	12.9	89.4	68.9	29.8	

## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

			Managed healthcare: management services				Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)							
Ref no.	Name of medical scheme	Name of administrator	Admini- strator R'000	Other 3rd parties R'000	Admini- strator pabpm R	Admini- strator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth
<b>Registered schemes: restricted continued</b>																														
1068	De Beers Benefit Society	Self-administered	944	-	4.7	10.6	-	-	-	-	-	-	-	-	-	-	-	-	944	5.8	4.7	10.6	16,298	14,743	10.5	7.3	7.0	80.4	62.8	28.0
1484	Edcon Medical Aid Scheme	Discovery Health (Pty) Ltd	2,078	-	23.4	46.8	6,260	5,746	9.0	73.2	71.8	1.9	70.6	64.6	9.3	141.1	128.3	10.0	8,338	97.5	94.0	187.9	8,556	8,006	6.9	10.9	11.4	96.5	90.0	7.2
1572	Engen Medical Benefit Fund	Metropolitan Health Corporate (Pty) Ltd	-	2,671	-	-	4,421	3,855	14.7	79.6	78.5	1.4	45.1	40.1	12.5	105.4	95.5	10.4	4,421	79.6	45.1	105.4	5,556	4,913	13.1	4.8	4.8	56.7	51.1	11.0
1585	Eyethumed Medical Scheme	Medscheme Holdings (Pty) Ltd	655	-	7.8	15.8	4,393	4,422	-0.6	77.7	68.5	13.4	52.2	45.5	14.7	106.1	94.8	11.9	5,048	89.3	60.0	122.0	5,654	6,452	-12.4	16.8	18.4	67.2	66.4	1.2
1271	Fishing Industry Medical Scheme (Fishmed)	Metropolitan Health Corporate (Pty) Ltd	-	199	-	-	519	531	-2.1	56.0	54.3	3.1	19.6	18.2	7.7	50.0	45.6	9.6	519	56.0	19.6	50.0	928	978	-5.1	22.2	24.7	34.9	33.5	4.2
1086	Food Workers Medical Benefit Fund	Self-administered	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,363	2,885	16.6	21.0	20.5	14.7	12.1	21.5
1578	Foschini Group Medical Aid Scheme	Metropolitan Health (Pty) Ltd	-	1,605	-	-	2,988	2,477	20.6	88.1	84.2	4.6	48.1	43.8	9.8	98.9	90.1	9.8	2,988	88.1	48.1	98.9	3,391	2,943	15.2	6.8	6.9	54.6	52.1	4.8
1568	Gold Fields Medical Scheme	Providence Healthcare Risk Managers (Pty) Ltd	4,983	-	22.0	49.3	12,004	9,203	30.4	70.1	63.6	10.2	53.1	44.0	20.7	118.9	99.3	19.7	16,987	99.2	75.1	168.2	17,123	14,481	18.2	10.4	10.8	75.7	69.2	9.4
1270	Golden Arrow Employees Medical Benefit Fund	Metropolitan Health Corporate (Pty) Ltd	1,318	-	16.6	40.1	2,956	2,500	18.2	86.7	88.8	-2.4	37.2	33.0	12.7	89.9	81.8	9.9	4,274	125.4	53.8	130.0	3,408	2,815	21.1	17.4	17.2	42.9	37.1	15.6
1598	Government Employees Medical Scheme (GEMS)	Metropolitan Health Corporate (Pty) Ltd	-	160,976	-	-	305,878	179,055	70.8	73.5	76.2	-3.5	25.7	21.5	19.5	71.3	58.9	21.1	305,878	73.5	25.7	71.3	416,367	234,875	77.3	4.7	4.2	35.0	28.3	23.7
1523	Grintek Electronics Medical Aid Scheme	Status Medical Aid Administrators (Pty) Ltd	-	741	-	-	2,000	2,183	-8.4	71.1	73.2	-2.9	59.8	63.6	-6.0	147.4	158.9	-7.2	2,000	71.1	59.8	147.4	2,814	2,981	-5.6	9.8	10.9	84.1	86.8	-3.1
1111	IBM (SA) Medical Scheme	Discovery Health (Pty) Ltd	1,264	-	20.6	47.0	3,689	3,241	13.8	65.1	64.5	0.9	60.2	54.1	11.3	137.3	124.9	9.9	4,952	87.4	80.8	184.4	5,666	5,028	12.7	9.9	10.1	92.5	83.9	10.3
1591	Impala Medical Plan	Self-administered	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	650	600	8.4	1.3	1.4	3.3	3.3	-
1559	Imperial Group Medical Scheme	Medscheme Holdings (Pty) Ltd	2,720	-	15.9	38.0	10,697	10,542	1.5	72.8	78.0	-6.7	62.7	58.7	6.8	149.5	142.2	5.1	13,417	91.4	78.6	187.5	14,684	13,509	8.7	9.3	9.0	86.0	75.2	14.4
1145	LA-Health Medical Scheme	Discovery Health (Pty) Ltd	13,814	615	23.0	49.0	49,909	42,053	18.7	79.8	80.4	-0.7	83.1	78.4	6.0	177.2	162.1	9.3	63,723	101.8	106.1	226.2	62,575	52,328	19.6	8.8	8.6	104.2	97.6	6.8
1197	Libcare Medical Scheme	V Med Administrators (Pty) Ltd	4,470	-	29.1	66.1	10,084	9,121	10.6	83.0	88.3	-6.0	65.7	62.0	6.0	149.2	141.3	5.6	14,553	119.8	94.9	215.3	12,149	10,324	17.7	7.1	7.4	79.2	70.1	13.0





## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

			Managed healthcare: management services				Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)								
Ref no.	Name of medical scheme	Name of administrator	Administrator R'000	Other 3rd parties R'000	Administrator pabpm R	Administrator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	
Registered schemes: restricted continued																															
1599	Lonmin Medical Scheme	Discovery Health (Pty) Ltd	6,388	-	36.6	38.8	6,388	5,977	6.9	91.8	90.5	1.4	36.6	37.4	-2.1	38.8	38.8	-	12,777	183.6	73.2	77.7	6,961	6,606	5.4	9.8	11.2	39.9	41.3	-3.4	
1547	Malcor Medical Scheme	Allcare Administrators (Pty) Ltd	1,650	1,146	13.5	30.8	11,920	10,311	15.6	95.3	94.2	1.2	97.6	88.2	10.7	222.3	203.5	9.2	13,571	108.5	111.1	253.1	12,511	10,943	14.3	9.7	9.7	102.4	93.6	9.4	
1042	Mascom Medical Scheme	Self-administered	-	-	-	-	-	218	-100.0	-	10.1	-100.0	-	15.7	-100.0	-	24.8	-100.0	-	-	-	-	-	-	2,154	-100.0	-	9.5	-	155.0	-100.0
1495	Massmart Health Plan	Medscheme Holdings (Pty) Ltd	1,592	-	28.5	62.0	3,620	2,893	25.1	90.2	85.4	5.6	64.8	59.3	9.3	141.0	128.7	9.6	5,211	129.8	93.3	203.0	4,013	3,387	18.5	6.0	6.3	71.8	69.4	3.5	
1039	MBMed MedicalAid Fund	Medscheme Holdings (Pty) Ltd	2,686	-	24.5	64.6	4,562	4,456	2.4	84.8	87.8	-3.4	41.6	38.0	9.5	109.7	99.7	10.0	7,248	134.7	66.1	174.3	5,381	5,075	6.0	6.2	6.0	49.1	43.3	13.4	
1588	MEDCOR	Agility Global Health Solutions Africa	16,634	-	25.6	67.5	23,427	36,724	-36.2	60.5	76.5	-20.9	36.1	40.2	-10.2	95.0	110.8	-14.3	40,061	103.5	61.7	162.5	38,715	48,017	-19.4	7.2	7.6	59.6	52.5	13.5	
1548	Medipos Medical Scheme	Medscheme Holdings (Pty) Ltd	6,307	-	22.6	49.0	18,230	15,831	15.2	87.8	86.8	1.2	65.4	58.5	11.8	141.5	128.5	10.1	24,537	118.2	88.0	190.5	20,757	18,233	13.8	7.4	7.6	74.4	67.4	10.4	
1535	Metrocare	Medscheme Holdings (Pty) Ltd	1,123	-	24.8	60.3	2,233	2,216	0.8	74.5	73.7	1.1	49.3	44.8	10.0	119.9	110.5	8.5	3,356	112.0	74.1	180.3	2,997	3,009	-0.4	5.7	5.8	66.2	60.9	8.7	
1105	Metropolitan Medical Scheme	Metropolitan Health (Pty) Ltd	-	2,656	-	-	9,174	8,010	14.5	93.3	92.2	1.2	56.9	51.6	10.3	137.0	126.7	8.1	9,174	93.3	56.9	137.0	9,833	8,690	13.2	7.7	7.7	61.0	56.0	8.9	
1569	Minemed Medical Scheme	Providence Healthcare Risk Managers (Pty) Ltd	3,752	-	20.9	46.5	7,272	6,728	8.1	71.1	65.4	8.7	40.5	38.6	4.9	90.0	87.4	3.0	11,024	107.7	61.4	136.5	10,233	10,283	-0.5	5.9	7.3	57.0	59.0	-3.4	
1566	Moremed Medical Scheme	Medscheme Holdings (Pty) Ltd	417	-	13.8	24.7	2,431	2,188	11.1	74.6	71.3	4.6	80.6	69.2	16.5	143.8	128.4	12.0	2,848	87.3	94.4	168.5	3,260	3,071	6.2	27.0	29.2	108.1	97.1	11.3	
1600	Motohealth Care	Momentum Medical Scheme Administrators (Pty) Ltd	20,083	-	16.8	39.0	68,749	52,360	31.3	87.4	65.5	33.4	57.4	34.1	68.3	133.5	79.9	67.1	88,831	112.9	74.2	172.5	78,695	79,973	-1.6	9.2	9.7	65.7	52.1	26.1	
1154	Nampak SA Medical Scheme	Momentum Medical Scheme Administrators (Pty) Ltd	2,635	-	17.6	42.1	9,973	8,926	11.7	85.4	85.0	0.5	66.7	59.3	12.5	159.2	144.7	10.0	12,607	107.9	84.4	201.3	11,680	10,507	11.2	7.4	7.3	78.2	69.8	12.0	
1241	Naspers Medical Fund	Self-administered	-	4,292	-	-	4,242	3,596	18.0	35.4	33.0	7.3	26.8	22.4	19.6	53.3	44.0	21.1	4,242	35.4	26.8	53.3	11,981	10,895	10.0	7.8	7.5	75.7	67.7	11.8	
1469	Nedgroup Medical Aid Scheme	Medscheme Holdings (Pty) Ltd	9,105	1,337	15.5	30.3	40,279	36,024	11.8	84.4	86.3	-2.2	68.6	60.7	13.0	134.0	119.8	11.9	49,384	103.4	84.1	164.3	47,745	41,747	14.4	9.4	9.1	81.3	70.4	15.5	

## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

			Managed healthcare: management services				Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)							
Ref no.	Name of medical scheme	Name of administrator	Administrator R'000	Other 3rd parties R'000	Administrator pabpm R	Administrator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth
<b>Registered schemes: restricted continued</b>																														
1584	Netcare Medical Scheme	Momentum Medical Scheme Administrators (Pty) Ltd	4,716	5,146	11.1	25.7	21,931	19,203	14.2	95.9	95.8	0.1	51.6	48.1	7.3	119.6	110.9	7.8	26,647	116.5	62.7	145.3	22,876	20,042	14.1	5.4	5.3	53.8	50.2	7.2
1214	Old Mutual Staff Medical Aid Fund	Medscheme Holdings (Pty) Ltd	7,082	-	19.3	40.5	21,885	20,533	6.6	80.9	84.2	-3.9	59.5	54.9	8.4	125.2	118.4	5.7	28,967	107.1	78.8	165.7	27,039	24,399	10.8	8.9	9.1	73.6	65.2	12.9
1441	Parmed Medical Aid Scheme	Medscheme Holdings (Pty) Ltd	519	-	8.0	19.5	4,564	3,807	19.9	79.5	77.0	3.2	70.0	60.1	16.5	171.4	152.7	12.2	5,083	88.5	78.0	190.9	5,743	4,943	16.2	4.3	4.4	88.1	78.1	12.8
1515	PG Bison Medical Aid Society	Allcare Administrators (Pty) Ltd	-	383	-	-	1,571	1,664	-5.6	91.6	83.9	9.2	92.7	81.4	13.9	199.5	181.3	10.0	1,571	91.6	92.7	199.5	1,715	1,983	-13.5	8.5	8.7	101.2	97.0	4.3
1186	PG Group Medical Scheme	Momentum Medical Scheme Administrators (Pty) Ltd	595	34	18.3	39.1	2,082	1,916	8.7	87.3	87.6	-0.3	63.9	59.3	7.8	136.9	126.9	7.9	2,677	112.2	82.2	176.1	2,386	2,186	9.1	5.4	5.5	73.3	67.7	8.3
1563	Pick & Pay Medical Scheme	Metropolitan Health (Pty) Ltd	-	4,831	-	-	10,853	9,202	17.9	79.7	77.4	3.0	56.4	51.0	10.6	118.7	107.6	10.3	10,853	79.7	56.4	118.7	13,614	11,896	14.4	7.6	7.8	70.7	66.0	7.1
1583	Platinum Health	Self-administered	752	-	1.1	2.0	-	-	-	-	-	-	-	-	-	-	-	-	752	2.8	1.1	2.0	26,430	17,521	50.8	8.1	6.2	40.2	28.1	43.1
1194	Profmed	Professional Medical Scheme Administrators (Pty) Ltd	7,481	7,820	10.1	25.6	44,763	38,113	17.4	65.0	63.2	2.8	60.5	51.5	17.5	153.4	133.1	15.3	52,244	75.8	70.6	179.1	68,903	60,289	14.3	10.4	10.3	93.1	81.5	14.2
1516	Quantum Medical Aid Society	Discovery Health (Pty) Ltd	3,932	-	22.5	47.0	11,564	10,779	7.3	83.3	83.2	0.1	66.1	60.1	10.0	138.3	125.8	9.9	15,497	111.7	88.6	185.3	13,877	12,958	7.1	11.3	11.4	79.3	72.2	9.8
1201	Rand Water Medical Scheme	Self-administered	1,132	-	13.1	32.7	-	-	-	-	-	-	-	-	-	-	-	-	1,132	23.7	13.1	32.7	4,781	4,129	15.8	5.3	5.1	55.5	49.5	12.1
1430	Remedi Medical Aid Scheme	Metropolitan Health Corporate (Pty) Ltd	-	5,988	-	-	23,738	20,308	16.9	88.2	89.7	-1.7	56.5	51.0	10.8	130.3	118.1	10.3	23,738	88.2	56.5	130.3	26,922	22,640	18.9	6.0	5.8	64.1	56.9	12.7
1176	Retail Medical Scheme	Discovery Health (Pty) Ltd	3,902	-	25.7	48.8	11,147	8,790	26.8	89.8	87.8	2.3	73.5	67.2	9.4	139.3	132.4	5.2	15,049	121.3	99.2	188.1	12,410	10,011	24.0	11.0	10.2	81.8	76.6	6.8
1013	Rhodes University Medical Scheme	Providence Healthcare Risk Managers (Pty) Ltd	491	-	19.3	41.3	1,402	1,234	13.6	81.2	81.1	0.1	55.0	51.0	7.8	117.9	108.0	9.2	1,893	109.6	74.2	159.1	1,727	1,522	13.5	7.4	7.8	67.7	62.9	7.6
1209	SA Breweries Medical Aid Society	Momentum Medical Scheme Administrators (Pty) Ltd	4,927	625	19.2	44.1	14,878	13,074	13.8	87.3	88.1	-0.9	58.1	53.2	9.2	133.2	123.3	8.0	19,805	116.2	77.3	177.3	17,044	14,834	14.9	7.5	7.5	66.5	60.4	10.1

## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

			Managed healthcare: management services				Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)							
Ref no.	Name of medical scheme	Name of administrator	Administrator R'000	Other 3rd parties R'000	Administrator pabpm R	Administrator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth
<b>Registered schemes: restricted continued</b>																														
1424	SABC Medical Aid Scheme	Medscheme Holdings (Pty) Ltd	3,232	-	26.8	58.0	6,533	5,614	16.4	89.3	86.7	3.0	54.1	48.4	11.8	117.2	105.6	11.0	9,765	133.5	80.9	175.2	7,312	6,476	12.9	4.8	4.8	60.6	55.9	8.4
1038	SAMWUMed	Self-administered	-	8,282	-	-	4,104	3,784	8.5	16.2	16.2	-	4.7	4.6	2.2	11.4	11.6	-1.7	4,104	16.2	4.7	11.4	25,403	23,400	8.6	5.2	6.6	29.0	28.5	1.8
1527	Sappi Medical Aid Scheme	Metropolitan Health Corporate (Pty) Ltd	-	2,421	-	-	6,391	5,801	10.2	87.5	85.2	2.7	55.6	49.8	11.6	129.1	117.1	10.2	6,391	87.5	55.6	129.1	7,306	6,805	7.4	5.2	5.5	63.5	58.5	8.5
1234	Sasolmed	Medscheme Holdings (Pty) Ltd	22,622	-	25.7	67.5	39,218	31,087	26.2	92.2	90.4	2.0	44.5	39.5	12.7	117.1	105.5	11.0	61,840	145.4	70.2	184.6	42,522	34,400	23.6	4.5	4.4	48.2	43.7	10.3
1531	Sedmed	Self-administered	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	585	431	35.9	3.3	2.6	24.0	17.6	36.4
1243	Siemens Medical Scheme	Medscheme Holdings (Pty) Ltd	2,448	-	30.2	68.3	5,242	4,776	9.8	92.0	90.7	1.4	64.7	58.7	10.2	146.3	133.1	9.9	7,690	134.9	95.0	214.7	5,700	5,263	8.3	5.9	5.8	70.4	64.7	8.8
1589	Solvita Medical Scheme	Prosperity Health Managers (Pty) Ltd	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1580	South African Police Service Medical Scheme (POLMED)	Metropolitan Health Corporate (Pty) Ltd	-	89,979	-	-	157,162	142,671	10.2	75.8	79.0	-4.1	27.8	26.1	6.5	78.5	74.6	5.2	157,162	75.8	27.8	78.5	207,239	180,676	14.7	4.8	4.8	36.6	33.0	10.9
1254	Stocksmed	Medscheme Holdings (Pty) Ltd	750	-	32.7	70.1	1,779	1,664	7.0	92.8	87.9	5.6	77.6	69.9	11.0	166.3	151.2	10.0	2,529	131.9	110.3	236.4	1,917	1,893	1.3	6.9	7.5	83.6	79.5	5.2
1544	Tiger Brands Medical Scheme	Status Medical Aid Administrators (Pty) Ltd	66	3,396	0.5	1.1	7,373	6,778	8.8	91.3	92.7	-1.5	53.1	48.4	9.7	122.5	111.6	9.8	7,439	92.1	53.6	123.6	8,076	7,313	10.4	5.2	5.3	58.1	52.2	11.3
1582	Transmed Medical Fund	Metropolitan Health Corporate (Pty) Ltd	-	36,570	-	-	80,635	77,541	4.0	76.6	77.5	-1.2	45.7	42.5	7.5	89.9	85.0	5.8	80,635	76.6	45.7	89.9	105,210	100,050	5.2	8.2	8.0	59.6	54.8	8.8
1579	Tsogo Sun Group Medical Scheme	Discovery Health (Pty) Ltd	1,705	-	22.8	48.3	4,292	3,951	8.6	62.0	61.5	0.8	57.3	55.6	3.1	121.7	118.4	2.8	5,997	86.6	80.1	170.0	6,922	6,425	7.7	10.7	11.4	92.4	90.3	2.3
1434	Umed	Discovery Health (Pty) Ltd	5,194	3,000	23.0	53.6	14,285	13,255	7.8	84.2	80.3	4.9	63.2	56.2	12.5	147.5	134.2	9.9	19,479	114.8	86.1	201.1	16,965	16,516	2.7	6.3	7.0	75.0	70.1	7.0
1597	Umvuzo Health Medical Scheme	Self-administered	-	5,280	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	18,158	16,661	9.0	10.7	10.2	47.0	39.5	19.0
1520	University of Kwa-Zulu Medical Scheme	Discovery Health (Pty) Ltd	1,934	-	23.0	49.5	5,803	6,028	-3.7	75.7	81.0	-6.5	68.9	68.2	1.0	148.4	146.4	1.4	7,737	101.0	91.8	197.9	7,661	7,438	3.0	9.4	9.6	90.9	84.2	8.0
1282	University of the Witwatersrand Staff Medical Aid Scheme	Medscheme Holdings (Pty) Ltd	2,159	-	28.7	60.5	5,454	4,789	13.9	88.5	88.6	-0.1	72.5	63.9	13.5	152.9	137.7	11.0	7,613	123.5	101.2	213.4	6,165	5,405	14.1	6.4	6.5	81.9	72.1	13.6

## Annexure P: Fees paid to administrators: registered schemes for the year ended 31 December 2008-2009

Managed healthcare: management services							Administration fees paid to administrators (incl. co-administration fees)												Total fees paid to administrators (managed healthcare: management services + administration fees)				Gross Administration Expenditure (GAE) (risk + PMSA)							
Ref no.	Name of medical scheme	Name of administrator	Admini- strator R'000	Other 3rd parties R'000	Admini- strator pabpm R	Admini- strator pampm R	2009 R'000	2008 R'000	% growth	2009 as % of GAE	2008 as % of GAE	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 pampm R	2008 pampm R	% growth	2009 R'000	As % of GAE	pabpm R	pampm R	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth
Registered schemes: restricted continued																														
1291	Witbank Coalfields Medical Aid Scheme	Self-administered	-	1,825	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	10,900	9,326	16.9	4.1	4.1	35.2	33.5	5.1
1293	Wooltru Healthcare Fund	Metropolitan Health Corporate (Pty) Ltd	-	3,021	-	-	13,757	13,612	1.1	82.6	84.1	-1.8	63.2	62.4	1.3	129.8	129.7	0.1	13,757	82.6	63.2	129.8	16,661	16,194	2.9	10.0	10.8	76.5	74.3	3.0
1253	Xstrata Medical Aid Scheme	Medscheme Holdings (Pty) Ltd	5,050	-	18.8	54.9	9,514	8,487	12.1	93.3	94.1	-0.9	35.5	34.3	3.5	103.4	97.5	6.1	14,563	142.7	54.3	158.3	10,202	9,022	13.1	6.8	6.9	38.0	36.5	4.1
Sub-total: registered restricted schemes			222,661	424,449	19.0	41.7	1,456,529	1,226,611	18.7	77.7	77.8	-0.1	41.3	38.3	7.8	100.7	92.4	9.0	1,679,190	87.4	46.3	112.2	1,955,854	1,643,610	19.0	6.4	6.5	52.3	48.2	8.5
Total registered schemes			1,267,152	668,405	20.7	46.8	5,639,366	5,173,528	9.0	80.0	82.5	-3.0	62.9	60.6	3.8	147.2	142.7	3.2	6,906,518	97.3	76.3	177.9	7,507,099	6,748,709	11.2	8.8	9.1	78.7	72.9	8.0
Notes																														

### Notes

Prior year figures have been restated.

PMSA = Personal Medical Savings Account

pabpm = per average beneficiary per month

pampm = per average member per month

GAE = Gross Administration Expenditure

GCI = Gross Contribution Income

The scheme liquidated in 2008. No figures were submitted at the time of finalising the Annual Report.

Cawmed Medical Scheme was liquidated with effect from 1 September 2008.

The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.

Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.

The schemes liquidated in 2008 and 2009. Figures were submitted.

Biz Health Medical Scheme was liquidated with effect from 30 April 2008.

Mascom Medical Scheme was liquidated with effect from 31 December 2008.

Purehealth Medical Scheme was liquidated with effect from 31 December 2009.

Stocksmed was liquidated with effect from 31 December 2009.



Annexure P: Fees paid to administrators: registered schemes for the years ended 31 December 2008 -2009

Notes (continued)

The scheme was deregistered in 2008.  
Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.

The following schemes amalgamated in 2008 and 2009:  
Global Health amalgamated with Munimed with effect from 1 January 2008.  
Cimas Wellness Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.  
Lifemed Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.  
Meridian Health amalgamated with Momentum Health with effect from 1 January 2008.  
BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.  
Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009.

The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.



## Annexure Q: Selected non-healthcare expenditure: registered schemes for the years ended 31 December 2008-2009

Gross Administration Expenditure (GAE) (risk + PMSA)									External audit fees			Trustee remuneration and other considerations							Principal Officer fees			Broker fees, marketing and advertising expenditure											
	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	No. of trustees	Average fee per trustee R'000	2008 R'000	No. of trustees	Average fee per trustee R'000	% growth in average fee	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	New members* 2009	New member* growth	Total as % of GCI 2009	pabpm 2009 R	pabpm 2008 R	% growth
Ref no.	Name of medical scheme																																
Registered schemes: open																																	
1252	Bestmed Medical Scheme	124,189	101,582	22.3	12.0	11.4	116.6	98.6	18.3	628	713	-12.0	2,318	17	136	2,086	17	123	11.1	1,835	1,483	23.8	28,687	27,483	4.4	23,268	57.0	2.8	26.9	26.7	0.7		
1512	Bonitas Medical Fund	570,286	450,636	26.6	9.2	8.8	74.1	63.1	17.4	1,444	2,344	-38.4	3,978	9	442	3,679	10	368	20.1	2,619	1,559	68.0	235,850	187,169	26.0	55,692	19.9	3.8	30.6	26.2	16.8		
1034	Cape Medical Plan	16,428	16,620	-1.2	13.5	14.5	89.0	86.6	2.8	496	399	24.3	128	11	12	87	11	8	47.3	655	542	20.9	624	840	-25.7	880	12.9	0.5	3.4	4.4	-22.7		
1552	Community Medical Aid Scheme (COMMED)	53,902	50,599	6.5	14.3	18.7	131.2	142.2	-7.7	220	274	-19.7	1,366	9	152	1,348	10	135	12.6	721	914	-21.1	8,426	6,868	22.7	1,086	8.4	2.2	20.5	19.3	6.2		
1491	Compare Wellness Medical Scheme	45,637	55,217	-17.3	10.4	13.5	119.4	133.4	-10.5	462	581	-20.6	571	8	71	822	19	43	64.8	616	616	-	9,358	9,041	3.5	873	6.5	2.1	24.5	21.8	12.4		
1125	Discovery Health Medical Scheme	2,552,566	2,275,988	12.2	10.7	10.9	106.5	98.4	8.2	2,608	2,860	-8.8	1,200	7	171	1,213	7	173	-1.0	2,615	2,332	12.1	538,275	503,385	6.9	153,562	16.7	2.3	22.5	21.8	3.2		
1202	Fedhealth Medical Scheme	225,608	205,370	9.9	10.0	10.6	99.3	92.4	7.5	857	541	58.4	3,227	13	248	3,002	12	250	-0.8	1,252	1,264	-0.9	78,198	71,878	8.8	20,823	24.2	3.5	34.4	32.3	6.5		
1554	Genesis Medical Scheme	19,272	17,578	9.6	11.8	10.9	75.5	63.2	19.5	268	352	-23.7	139	5	28	319	4	80	-65.0	995	867	14.8	2,735	3,274	-16.5	875	12.2	1.7	10.7	11.8	-9.3		
1561	Gen-Health Medical Scheme	31,113	25,466	22.2	12.7	13.2	91.5	82.3	11.2	832	139	498.9	-	3	-	-	3	-	-	-	-	-	6,827	6,685	2.1	3,296	26.2	2.8	20.1	21.6	-6.9		
1466	Good Hope Medical Aid Society	3,825	3,741	2.2	9.6	10.0	36.3	32.7	11.0	189	154	23.2	157	6	26	223	6	37	-29.7	213	205	4.0	1,208	1,053	14.7	1,261	36.7	3.0	11.5	9.2	25.0		
1537	Hosmed Medical Aid Scheme	114,001	97,025	17.5	13.6	12.3	103.4	81.0	27.7	537	507	5.9	1,902	7	272	1,422	12	119	129.3	892	929	-4.0	44,880	57,682	-22.2	14,314	44.2	5.4	40.7	48.1	-15.4		
1556	Humanity Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1577	Ingwe Health Plan	19,186	22,618	-15.2	12.4	13.0	64.4	63.0	2.2	820	565	45.1	127	9	14	88	8	11	28.8	1,139	1,293	-11.9	7,523	9,100	-17.3	10,339	75.6	4.9	25.2	25.3	-0.4		
1087	Keyhealth	122,047	127,762	-4.5	8.0	8.3	96.1	84.7	13.5	1,252	1,189	5.3	1,861	11	169	2,303	25	92	83.7	1,160	1,338	-13.3	40,256	41,167	-2.2	1,114	2.5	2.7	31.7	27.3	16.1		
1576	Liberty Health Medical Scheme	109,973	110,265	-0.3	10.2	10.5	96.5	91.0	6.0	424	401	5.9	2,696	7	385	2,298	7	328	17.3	1,884	1,722	9.4	49,501	50,356	-1.7	9,274	20.6	4.6	43.4	41.6	4.3		
1549	Medicover	78,606	71,667	9.7	7.9	6.8	59.8	42.3	41.4	794	1,473	-46.1	1,937	8	242	1,916	7	274	-11.5	400	1,000	-60.0	21,998	26,126	-15.8	1,538	4.1	2.2	16.7	15.4	8.4		
1149	Medihelp	267,975	239,821	11.7	8.3	8.4	104.7	110.4	-5.2	1,200	1,373	-12.6	1,135	12	95	1,043	9	116	-18.4	3,133	3,083	1.6	47,684	43,275	10.2	22,302	19.8	1.5	18.6	19.9	-6.5		
1506	Medimed Medical Scheme	6,768	7,351	-7.9	7.4	8.2	48.9	48.6	0.6	-	-	-	-	11	-	-	10	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1140	Medshield Medical Scheme	142,679	171,152	-16.6	9.6	13.0	67.7	84.4	-19.8	979	1,404	-30.3	2,771	11	252	2,352	13	181	39.2	1,303	1,338	-2.6	98,119	100,902	-2.8	12,134	16.6	6.6	46.6	49.8	-6.4		
1167	Momentum Health	180,039	169,210	6.4	9.5	10.3	84.4	81.5	3.6	617	546	13.0	1,097	10	110	1,046	13	80	36.3	1,136	1,000	13.6	62,669	57,265	9.4	15,438	18.9	3.3	29.4	27.6	6.5		
1166	National Independent Medical Aid Society (NIMAS)	26,192	28,392	-7.7	7.6	8.3	69.2	60.2	15.0	399	362	10.2	261	6	44	276	7	39	10.3	399	385	3.7	6,342	8,582	-26.1	2,010	14.5	1.8	16.8	18.2	-7.7		
1560	Openplan Medical Scheme	-	21,918	-100.0	-	9.7	-	100.4	-100.0	-	567	-100.0	-	-	-	799	10	80	-100.0	-	1,104	-100.0	-	3,511	-100.0	-	-	-	-	16.1	-100.0		
1215	Oxygen Medical Scheme	148,061	143,083	3.5	9.7	9.1	84.5	68.6	23.2	774	732	5.6	1,651	9	183	1,781	8	223	-17.6	887	907	-2.2	46,222	52,670	-12.2	4,184	7.2	3.0	26.4	25.3	4.3		
1587	Pathfinder Medical Scheme	-	4,298	-100.0	-	19.2	-	116.0	-100.0	-	105	-100.0	-	-	-	0	6	0	-100.0	-	223	-100.0	-	457	-100.0	-	-	-	-	-	12.3	-100.0	
1546	Pharos Medical Plan	28,420	27,028	5.2	13.6	13.7	137.8	125.5	9.8	528	489	8.0	158	10	16	200	8	25	-37.0	1,247	1,242	0.4	8,663	8,354	3.7	1,456	20.3	4.1	42.0	38.8	8.2		
1454	Pro Sano Medical Scheme	74,293	69,316	7.2	9.5	9.6	87.4	78.8	10.9	273	755	-63.9	-	-	-	-	-	-	-	-	-	-	14,784	15,642	-5.5	4,705	14.9	1.9	17.4	17.8	-2.2		

## Annexure Q: Selected non-healthcare expenditure: registered schemes for the years ended 31 December 2008-2009

Gross Administration Expenditure (GAE) (risk + PMSA)									External audit fees			Trustee remuneration and other considerations								Principal Officer fees			Broker fees, marketing and advertising expenditure								
	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	No. of trustees	Average fee per trustee R'000	2008 R'000	No. of trustees	Average fee per trustee R'000	% growth in average fee	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	New members* 2009	New member* growth	Total as % of GCI 2009	pabpm 2009 R	pabpm 2008 R	% growth	
Ref no.	Name of medical scheme																														
Registered schemes: open continued																															
I196	Protea Medical Aid Society	7,437	5,344	39.2	15.4	13.4	91.5	93.0	-1.6	189	279	-32.4	128	5	26	81	5	16	58.8	602	506	18.9	1,345	456	195.3	4,533	73.1	2.8	16.6	7.9	110.1
I170	Purehealth Medical Scheme	11,531	14,949	-22.9	8.6	9.2	140.4	126.3	11.2	339	176	93.3	440	5	88	367	5	73	19.8	915	792	15.5	759	1,489	-49.0	220	6.8	0.6	9.2	12.6	-27.0
I586	Renaissance Health Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I575	Resolution Health Medical Scheme	110,183	111,018	-0.8	17.8	17.4	114.2	99.5	14.8	513	180	184.2	3,260	11	296	1,529	8	191	55.1	1,220	891	36.9	28,319	30,838	-8.2	7,192	21.7	4.6	29.4	27.6	6.5
I446	Selfmed Medical Scheme	36,447	33,886	7.6	12.5	12.2	122.0	103.0	18.4	504	432	16.6	2,200	5	440	2,660	5	532	-17.3	66	289	-77.2	6,389	6,858	-6.8	794	7.1	2.2	21.4	20.8	2.9
I486	Sizwe Medical Fund	161,813	156,363	3.5	10.3	10.7	84.1	79.1	6.3	572	1,291	-55.7	832	11	76	836	12	70	8.6	1,849	1,702	8.7	28,781	30,865	-6.8	8,034	13.0	1.8	15.0	15.6	-3.8
I141	Spectramed	141,653	159,948	-11.4	9.7	10.3	94.8	82.0	15.6	805	487	65.4	673	7	96	802	7	115	-16.1	1,006	700	43.8	43,054	43,079	-0.1	4,489	9.2	3.0	28.8	22.1	30.3
I464	Suremed Health	4,810	4,134	16.4	11.8	11.3	107.1	98.2	9.1	-	-	-	714	3	238	569	3	190	25.5	340	306	10.9	1,200	1,066	12.6	423	27.3	2.9	26.7	25.3	5.5
I147	Telemed	74,201	65,130	13.9	7.7	7.1	114.1	89.2	27.9	1,871	681	174.7	901	11	82	644	11	59	39.8	1,550	1,258	23.2	8,007	11,691	-31.5	1,338	5.4	0.8	12.3	16.0	-23.1
I592	Thebemed	9,138	10,229	-10.7	10.8	9.7	51.3	39.5	29.9	177	125	41.3	231	8	29	172	6	29	0.8	185	167	10.9	2,712	3,033	-10.6	689	15.7	3.2	15.2	11.7	29.9
I422	Topmed Medical Scheme	32,968	30,398	8.5	11.1	11.2	102.8	96.3	6.7	421	385	9.5	573	6	95	515	7	74	29.8	574	392	46.4	7,559	7,176	5.3	3,112	24.8	2.5	23.6	22.7	4.0
Sub-total: registered open schemes		5,551,246	5,105,100	8.7	9.4	10.4	95.8	87.4	9.6	21,994	22,862	-3.8	38,630	271	150	36,479	316	122	22.8	33,410	32,349	3.3	1,486,954	1,429,315	4.0	391,248	18.4	2.7	25.7	24.5	4.9
Registered schemes: restricted																															
I005	AECI Medical Aid Society	15,150	14,242	6.4	6.5	6.8	80.6	73.5	9.7	325	299	8.9	13	18	1	-	22	-	100.0	-	-	-	-	-	-	-	-	-	-	-	-
I487	Afrisam SA Medical Scheme	3,804	3,172	19.9	9.8	7.5	121.4	86.3	40.7	304	161	88.4	-	11	-	-	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I567	Afrox Medical Aid Society	7,147	6,067	17.8	8.8	8.6	75.0	65.4	14.7	171	167	2.8	-	9	-	-	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I456	Alliance Midmed Medical Scheme	4,425	4,305	2.8	8.1	8.1	75.5	71.3	5.9	87	74	16.6	18	8	2	19	11	2	33.1	-	-	-	-	-	-	-	-	-	-	-	-
I534	Altron Medical Aid Scheme	12,747	14,185	-10.1	9.7	10.1	105.8	100.4	5.4	121	143	-15.1	41	9	5	47	9	5	-14.1	204	275	-25.5	-	-	-	-	-	-	-	-	-
I012	Anglo Medical Scheme	24,118	22,852	5.5	6.1	6.0	73.8	63.8	15.7	305	285	7.0	793	32	25	781	26	30	-17.5	1,425	1,283	11.0	-	-	-	-	-	-	-	-	-
I571	Anglovaal Group Medical Scheme	10,892	9,661	12.7	8.8	9.0	103.1	92.6	11.3	224	120	85.7	-	12	-	-	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I279	Bankmed	189,806	174,621	8.7	7.8	7.7	79.1	72.2	9.6	575	588	-2.1	1,059	13	81	1,040	15	69	17.5	1,528	1,200	27.3	2,010	1,866	7.7	9,624	9.6	0.1	0.8	0	-
I507	Barloworld Medical Scheme	11,016	9,772	12.7	5.2	5.3	72.3	65.3	10.7	341	457	-25.4	-	8	-	-	11	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I557	BHP Billiton SA Medical Scheme	-	5,585	-100.0	-	14.3	-	114.3	-100.0	-	72	-100.0	-	-	-	-	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I115	Biz Health Medical Scheme	-	2,275	-100.0	-	17.6	-	421.9	-100.0	-	30	-100.0	-	-	-	-	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-

## Annexure Q: Selected non-healthcare expenditure: registered schemes for the years ended 31 December 2008-2009

Gross Administration Expenditure (GAE) (risk + PMSA)									External audit fees			Trustee remuneration and other considerations								Principal Officer fees			Broker fees, marketing and advertising expenditure																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	No. of trustees	Average fee per trustee R'000	2008 R'000	No. of trustees	Average fee per trustee R'000	% growth in average fee	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	New members* 2009	New member* growth	Total as % of GCI 2009	pabpm 2009 R	pabpm 2008 R	% growth																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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## Annexure Q: Selected non-healthcare expenditure: registered schemes for the years ended 31 December 2008-2009

Gross Administration Expenditure (GAE) (risk + PMSA)									External audit fees			Trustee remuneration and other considerations							Principal Officer fees			Broker fees, marketing and advertising expenditure									
	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	No. of trustees	Average fee per trustee R'000	2008 R'000	No. of trustees	Average fee per trustee R'000	% growth in average fee	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	New members* 2009	New member* growth	Total as % of GCI 2009	pabpm 2009 R	pabpm 2008 R	% growth	
Ref no.	Name of medical scheme																														
Registered schemes: open continued																															
1559	Imperial Group Medical Scheme	14,684	13,509	8.7	9.3	9.0	86.0	75.2	14.4	270	169	59.1	-	6	-	-	4	-	-	120	217	-44.7	-	7	-100.0	-	-	-	-	-	-
1145	LA-Health Medical Scheme	62,575	52,328	19.6	8.8	8.6	104.2	97.6	6.8	492	411	19.7	1,719	18	96	1,209	15	81	18.5	1,235	1,092	13.1	11,289	9,711	16.2	5,365	21.8	1.6	18.8	0	3.9
1197	Libcare Medical Scheme	12,149	10,324	17.7	7.1	7.4	79.2	70.1	13.0	267	164	62.3	186	9	21	181	6	30	-31.6	600	323	85.7	13	-	100.0	1,285	22.5	-	0.1	-	100.0
1599	Lonmin Medical Scheme	6,961	6,606	5.4	9.8	11.2	39.9	41.3	-3.4	140	117	19.5	-	7	-	-	7	-	-	-	-	-	-	-	-	-	-	-	-	-	
1547	Malcor Medical Scheme	12,511	10,943	14.3	9.7	9.7	102.4	93.6	9.4	219	262	-16.3	-	6	-	-	8	-	-	96	78	23.7	56	-	100.0	628	13.7	-	0.5	-	100.0
1042	Mascom Medical Scheme	-	2,154	-100.0	-	9.5	-	155.0	-100.0	-	15	-100.0	-	-	-	-	8	-	-	-	910	-100.0	-	-	-	-	-	-	-	-	-
1495	Massmart Health Plan	4,013	3,387	18.5	6.0	6.3	71.8	69.4	3.5	186	174	7.2	23	13	2	12	15	1	118.3	6	-	100.0	-	-	-	-	-	-	-	-	-
1039	MBMed Medical Aid Fund	5,381	5,075	6.0	6.2	6.0	49.1	43.3	13.4	146	51	187.2	-	13	-	-	15	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1588	MEDCOR	38,715	48,017	-19.4	7.2	7.6	59.6	52.5	13.5	461	306	50.7	631	15	42	537	13	41	1.8	1,013	756	34.0	859	1,344	-36.1	156	1.0	0.2	1.3	0	-13.3
1548	Medipos Medical Scheme	20,757	18,233	13.8	7.4	7.6	74.4	67.4	10.4	278	158	76.4	89	12	7	143	11	13	-43.3	-	-	-	-	32	-100.0	-	-	-	-	0	-100.0
1535	Metrocare	2,997	3,009	-0.4	5.7	5.8	66.2	60.9	8.7	304	288	5.6	137	8	17	-	10	-	100.0	-	-	-	-	-	-	-	-	-	-	-	-
1105	Metropolitan Medical Scheme	9,833	8,690	13.2	7.7	7.7	61.0	56.0	8.9	276	278	-0.6	5	13	0	8	11	1	-47.0	-	-	-	-	-	-	-	-	-	-	-	-
1569	Minemed Medical Scheme	10,233	10,283	-0.5	5.9	7.3	57.0	59.0	-3.4	95	78	21.3	19	16	1	17	13	1	-5.2	-	-	-	155	1,424	-89.1	1,214	18.4	0.1	0.9	0	-89.0
1566	Moremed Medical Scheme	3,260	3,071	6.2	27.0	29.2	108.1	97.1	11.3	205	234	-12.2	-	4	-	-	4	-	-	227	207	10.0	-	-	-	-	-	-	-	-	-
1600	Morohealth Care	78,695	79,973	-1.6	9.2	9.7	65.7	52.1	26.1	1,512	2,069	-26.9	678	11	62	428	8	54	15.2	455	425	6.9	1,809	5,804	-68.8	3,960	10.1	0.2	1.5	0	-60.5
1154	Nampak SA Medical Scheme	11,680	10,507	11.2	7.4	7.3	78.2	69.8	12.0	147	134	10.0	42	11	4	56	14	4	-5.1	-	-	-	-	-	-	-	-	-	-	-	-
1241	Naspers Medical Fund	11,981	10,895	10.0	7.8	7.5	75.7	67.7	11.8	413	343	20.3	10	17	1	10	15	1	-11.8	532	498	6.8	-	-	-	-	-	-	-	-	-
1469	Nedgroup Medical Aid Scheme	47,745	41,747	14.4	9.4	9.1	81.3	70.4	15.5	304	435	-30.0	6	18	0	13	17	1	-55.5	500	-	100.0	-	-	-	-	-	-	-	-	-
1584	Netcare Medical Scheme	22,876	20,042	14.1	5.4	5.3	53.8	50.2	7.2	158	147	8.1	106	14	8	77	10	8	-2.0	205	205	-	-	-	-	-	-	-	-	-	-
1214	Old Mutual Staff Medical Aid Fund	27,039	24,399	10.8	8.9	9.1	73.6	65.2	12.9	267	272	-1.7	476	10	48	87	7	12	283.6	1,798	-	100.0	-	-	-	-	-	-	-	-	-
1441	Parmed Medical Aid Scheme	5,743	4,943	16.2	4.3	4.4	88.1	78.1	12.8	222	223	-0.7	39	26	1	101	16	6	-76.3	525	427	22.8	-	-	-	-	-	-	-	-	-
1515	PG Bison Medical Aid Society	1,715	1,983	-13.5	8.5	8.7	101.2	97.0	4.3	19	118	-84.3	-	6	-	-	6	-	-	103	103	-	-	-	-	-	-	-	-	-	-
1186	PG Group Medical Scheme	2,386	2,186	9.1	5.4	5.5	73.3	67.7	8.3	112	106	5.5	-	10	-	-	14	-	-	-	-	-	10	-	100.0	128	10.3	-	0.3	-	100.0
1563	Pick & Pay Medical Scheme	13,614	11,896	14.4	7.6	7.8	70.7	66.0	7.1	227	228	-0.6	-	11	-	-	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1583	Platinum Health	26,430	17,521	50.8	8.1	6.2	40.2	28.1	43.1	964	944	2.1	3	21	0	3	26	0	23.4	952	326	192.3	-	-	-	-	-	-	-	-	-
1194	Profmed	68,903	60,289	14.3	10.4	10.3	93.1	81.5	14.2	641	549	16.8	1,396	10	140	1,430	10	143	-2.4	1,672	1,195	39.9	9,228	7,685	20.1	2,124	8.7	1.4	12.5	0	20.2
1516	Quantum Medical Aid Society	13,877	12,958	7.1	11.3	11.4	79.3	72.2	9.8	209	193	8.1	4	15	0	2	15	0	106.6	180	180	-	-	-	-	-	-	-	-	-	-
1201	Rand Water Medical Scheme	4,781	4,129	15.8	5.3	5.1	55.5	49.5	12.1	231	202	14.6	-	18	-	-	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1430	Remedi Medical Aid Scheme	26,922	22,640	18.9	6.0	5.8	64.1	56.9	12.7	-	-	-	-	10	-	-	10	-	-	821	477	72.2	-	-	-	-	-	-	-	-	-

## Annexure Q: Selected non-healthcare expenditure: registered schemes for the years ended 31 December 2008-2009

Gross Administration Expenditure (GAE) (risk + PMSA)									External audit fees			Trustee remuneration and other considerations								Principal Officer fees			Broker fees, marketing and advertising expenditure									
	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	No. of trustees	Average fee per trustee R'000	2008 R'000	No. of trustees	Average fee per trustee R'000	% growth in average fee	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	New members 2009	New member* growth	Total as % of GCI 2009	pabpm 2009 R	pabpm 2008 R	% growth		
Ref no.	Name of medical scheme																															
Registered schemes: open continued																																
1176	Retail Medical Scheme	12,410	10,011	24.0	11.0	10.2	81.8	76.6	6.8	209	214	-2.5	-	6	-	-	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1013	Rhodes University Medical Scheme	1,727	1,522	13.5	7.4	7.8	67.7	62.9	7.6	59	64	-6.9	-	7	-	-	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1209	SA Breweries Medical Aid Society	17,044	14,834	14.9	7.5	7.5	66.5	60.4	10.1	200	182	10.0	0	11	0	1	11	0	-34.4	-	-	-	-	-	-	-	-	-	-	-	-	
1424	SABC Medical Aid Scheme	7,312	6,476	12.9	4.8	4.8	60.6	55.9	8.4	157	155	1.7	167	10	17	84	8	11	58.5	-	-	-	-	-	-	-	-	-	-	-	-	
1038	SAMWUMed	25,403	23,400	8.6	5.2	6.6	29.0	28.5	1.8	325	407	-20.1	464	19	24	602	20	30	-18.9	933	776	20.2	5,670	5,516	2.8	5,593	18.5	1.2	6.5	0	-3.0	
1527	Sappi Medical Aid Scheme	7,306	6,805	7.4	5.2	5.5	63.5	58.5	8.5	109	96	13.6	46	12	4	51	17	3	28.2	-	-	-	-	-	-	-	-	-	-	-	-	
1234	Sasolmed	42,522	34,400	23.6	4.5	4.4	48.2	43.7	10.3	323	313	3.3	101	17	6	184	16	11	-48.2	-	-	-	-	-	-	-	-	-	-	-	-	
1531	Sedmed	585	431	35.9	3.3	2.6	24.0	17.6	36.4	199	166	19.8	-	13	-	-	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1243	Siemens Medical Scheme	5,700	5,263	8.3	5.9	5.8	70.4	64.7	8.8	140	144	-2.3	29	6	5	33	7	5	-	-	-	-	-	-	-	-	-	-	-	-	-	
1589	Solvita Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1580	South African Police Service Medical Scheme (POLMED)	207,239	180,676	14.7	4.8	4.8	36.6	33.0	10.9	882	1,457	-39.5	942	16	59	693	14	49	19.0	2,512	2,002	25.5	10	41	-74.7	14,078	8.4	-	-	-	-	
1254	Stocksmed	1,917	1,893	1.3	6.9	7.5	83.6	79.5	5.2	(2)	108	-101.9	-	8	-	12	9	1	-100.0	-	-	-	-	-	-	-	-	-	-	-	-	
1544	Tiger Brands Medical Scheme	8,076	7,313	10.4	5.2	5.3	58.1	52.2	11.3	153	132	15.9	1	8	0	1	10	0	30.9	-	-	-	65	-	100.0	420	8.4	-	0.5	-	100.0	
1582	Transmed Medical Fund	105,210	100,050	5.2	8.2	8.0	59.6	54.8	8.8	1,676	1,597	4.9	1,932	22	88	1,888	20	94	-7.0	1,804	1,472	22.6	1,979	2,852	-30.6	4,590	6.2	0.2	1.1	0	-31.3	
1579	Tsogo Sun Group Medical Scheme	6,922	6,425	7.7	10.7	11.4	92.4	90.3	2.3	235	270	-12.8	-	9	-	-	10	-	-	-	-	-	87	-	100.0	715	23.2	0.1	1.2	-	100.0	
1434	Umed	16,965	16,516	2.7	6.3	7.0	75.0	70.1	7.0	281	355	-21.0	36	12	3	33	17	2	56.6	632	756	-16.3	19	-	100.0	305	3.8	-	0.1	-	100.0	
1597	Umvuzo Health Medical Scheme	18,158	16,661	9.0	10.7	10.2	47.0	39.5	19.0	375	297	26.3	311	10	31	389	10	39	-20.2	1,240	1,170	6.0	9,985	4,275	133.6	2,629	15.6	5.9	25.8	0	155.4	
1520	University of Kwa-Zulu Natal Medical Scheme	7,661	7,438	3.0	9.4	9.6	90.9	84.2	8.0	221	126	76.1	-	13	-	-	14	-	-	285	240	19.0	-	-	-	-	-	-	-	-	-	
1282	University of the Witwatersrand Staff Medical Aid Scheme	6,165	5,405	14.1	6.4	6.5	81.9	72.1	13.6	178	160	11.3	38	11	3	32	10	3	9.1	36	30	20.0	-	-	-	-	-	-	-	-	-	
1291	Witbank Coalfields Medical Aid Scheme	10,900	9,326	16.9	4.1	4.1	35.2	33.5	5.1	390	215	80.8	7	26	0	-	22	-	100.0	966	822	17.4	93	-	100.0	1,666	15.9	-	0.3	-	100.0	
1293	Wooltru Healthcare Fund	16,661	16,194	2.9	10.0	10.8	76.5	74.3	3.0	316	348	-9.1	16	11	1	15	10	1	-1.8	455	421	8.0	-	-	-	-	-	-	-	-	-	



## Annexure Q: Selected non-healthcare expenditure: registered schemes for the years ended 31 December 2008-2009

Gross Administration Expenditure (GAE) (risk + PMSA)									External audit fees			Trustee remuneration and other considerations								Principal Officer fees			Broker fees, marketing and advertising expenditure								
	2009 R'000	2008 R'000	% growth	As % of GCI 2009	As % of GCI 2008	pabpm 2009 R	pabpm 2008 R	% growth	2009 R'000	2008 R'000	% growth	2009 R'000	No. of trustees	Average fee per trustee R'000	2008 R'000	No. of trustees	Average fee per trustee R'000	% growth in average fee	2009 R'000	2008 R'000	% growth	2009 R'000	2008 R'000	% growth	New members* 2009	New member* growth	Total as % of GCI 2009	pabpm 2009 R	pabpm 2008 R	% growth	
Ref no.	Name of medical scheme																														
Registered schemes: restricted continued																															
1253	Xstrata Medical Aid Scheme	10,202	9,022	13.1	6.8	6.9	38.0	36.5	4.1	-	38	-100.0	-	21	-	-	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Sub-total: registered restricted schemes		1,955,854	1,643,610	19.0	6.4	6.5	52.3	48.2	8.5	22,031	22,000	0.1	15,482	932	24	13,717	934	23	3.0	30,371	23,606	28.7	87,848	63,322	38.7	191,717	21.3	0.4	3.1	2.6	19.2
Total registered schemes		7,507,099	6,748,709	11.2	8.8	9.1	78.7	72.9	8.0	44,025	44,862	-1.9	54,113	1,203	60	50,195	1,250	57	6.0	63,781	55,955	14.0	1,574,802	1,492,638	5.5	582,965	19.3	2.1	18.3	18.1	1.1

### Notes

Prior year figures have been restated.

PMSA = Personal Medical Savings Account

pabpm = per average beneficiary per month

GAE = Gross Administration Expenditure

GCI = Gross Contribution Income

Broker fees include all broker service fees and other distribution costs paid.

\* New member growth was calculated only on medical schemes who incurred broker fees as well as marketing and advertising expenditure. New members obtained through amalgamations were excluded.

The scheme liquidated in 2008. No figures were submitted at the time of finalising the Annual Report.

Cawmed Medical Scheme was liquidated with effect from 1 September 2008.

The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.

Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.

The schemes liquidated in 2008 and 2009. Figures were submitted.

Biz Health Medical Scheme was liquidated with effect from 30 April 2008.

Mascom Medical Scheme was liquidated with effect from 31 December 2008.

Purehealth Medical Scheme was liquidated with effect from 31 December 2009.

Stocksmed was liquidated with effect from 31 December 2009.

Annexure Q: Selected non-healthcare expenditure: registered schemes for the years ended 31 December 2008-2009

Notes (continued)

- The scheme was deregistered in 2008.
- Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.
- The following schemes amalgamated in 2008 and 2009:
  - Global Health amalgamated with Munimed with effect from 1 January 2008.
  - Cimas Wellness Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.
  - Lifemed Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.
  - Meridian Health amalgamated with Momentum Health with effect from 1 January 2008.
  - BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.
  - Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009.
- The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.



## Annexure R: Operating results and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Average members			Average beneficiaries			Net healthcare result								Year-end reserve position			Solvency ratio		
Ref no.	Name of medical scheme	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	R'000	% of GCI	% of net surplus (deficit)	2008 R'000	% of GCI	% of net surplus (deficit)	% growth	pab 2009	pab 2008	% growth	2009 %	2008 %	% growth
Registered schemes: open																										
1252	Bestmed Medical Scheme	40,801	36,595	11.5	90,641	85,311	6.2	39,320	35,808	9.8	88,758	85,833	3.4	(34,148)	-3.3	-192.5	(25,397)	-2.9	-58.4	-34.5	5,073.5	5,038.5	0.7	43.4	48.5	-10.5
1512	Bonitas Medical Fund	279,546	258,910	8.0	650,846	608,485	7.0	274,327	250,270	9.6	641,674	595,361	7.8	(451,435)	-7.3	186.3	(218,274)	-4.2	-299.6	-106.8	3,448.3	4,087.3	-15.6	35.7	47.3	-24.5
1034	Cape Medical Plan	6,800	7,118	-4.5	15,243	15,938	-4.4	6,903	7,176	-3.8	15,378	16,002	-3.9	(14,852)	-12.2	-2,231.3	(10,764)	-9.4	-51.8	-38.0	10,281.7	9,821.8	4.7	129.8	136.8	-5.1
1552	Community Medical Aid Scheme (COMMED)	12,869	16,056	-19.8	30,266	41,050	-26.3	14,075	11,492	22.5	34,235	29,661	15.4	(39,566)	-10.5	179.0	(32,821)	-12.1	184.0	-20.5	2,161.7	3,240.4	-33.3	19.7	35.5	-44.5
1491	Compcare Wellness Medical Scheme	13,353	14,640	-8.8	30,587	33,907	-9.8	13,835	14,797	-6.5	31,844	34,484	-7.7	(86,751)	-19.8	224.9	(69,608)	-17.0	168.2	-24.6	3,834.5	4,705.0	-18.5	27.9	39.6	-29.5
1125	Discovery Health Medical Scheme	917,580	865,433	6.0	2,041,908	1,953,463	4.5	893,411	850,636	5.0	1,996,866	1,928,108	3.6	94,849	0.4	12.0	293,080	1.4	29.4	-67.6	3,038.8	2,738.4	11.0	25.5	25.4	0.4
1202	Fedhealth Medical Scheme	86,120	84,873	1.5	186,446	188,838	-1.3	86,797	81,670	6.3	189,259	185,213	2.2	(119,631)	-5.3	-319.3	(36,717)	-1.9	-48.0	-225.8	3,071.0	2,935.8	4.6	25.8	28.2	-8.5
1554	Genesis Medical Scheme	7,194	7,603	-5.4	20,890	22,300	-6.3	7,305	7,861	-7.1	21,263	23,168	-8.2	11,765	7.2	42.8	11,328	7.0	38.0	3.9	8,138.3	6,282.2	29.5	106.2	90.1	17.9
1561	Gen-Health Medical Scheme	12,577	10,544	19.3	30,460	25,713	18.5	11,692	10,579	10.5	28,345	25,780	10.0	(55,609)	-22.7	131.5	(37,880)	-19.7	320.4	-46.8	1,852.5	3,676.6	-49.6	21.5	49.2	-56.3
1466	Good Hope Medical Aid Society	3,437	3,330	3.2	8,619	8,921	-3.4	3,395	3,406	-0.3	8,769	9,527	-8.0	(2,351)	-5.9	-206.0	(1,932)	-5.1	-64.4	-21.7	5,021.7	4,333.8	15.9	110.2	109.8	0.4
1537	Hosmed Medical Aid Scheme	32,411	28,931	12.0	91,898	91,659	0.3	30,633	30,466	0.5	91,854	99,856	-8.0	4,351	0.5	27.5	(14,445)	-1.8	80.6	130.1	1,126.8	877.9	28.4	12.4	11.1	11.7
1556	Humanity Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1577	Ingwe Health Plan	13,676	17,857	-23.4	19,198	28,516	-32.7	17,217	18,779	-8.3	24,841	29,928	-17.0	(1,900)	-1.2	-89.4	(11,708)	-6.7	215.0	83.8	749.7	551.2	36.0	12.0	9.5	26.3
1087	Keyhealth	44,401	51,220	-13.3	102,535	120,806	-15.1	45,718	52,920	-13.6	105,817	125,652	-15.8	(104,707)	-6.9	202.0	(16,435)	-1.1	-146.7	-537.1	2,106.5	2,203.4	-4.4	14.7	17.9	-17.9
1576	Liberty Health Medical Scheme	44,985	48,355	-7.0	95,173	103,351	-7.9	44,531	46,928	-5.1	94,969	100,949	-5.9	(66,229)	-6.2	222.3	14,635	1.4	30.3	-552.5	2,205.6	2,370.1	-6.9	19.5	22.8	-14.5
1549	Medicover	37,768	53,555	-29.5	91,985	136,558	-32.6	44,025	54,800	-19.7	109,630	141,079	-22.3	(55,113)	-5.5	-1,928.4	(95,419)	-9.0	-1,074.4	42.2	3,554.3	2,774.5	28.1	39.2	36.9	6.2
1149	Medihelp	112,678	96,996	16.2	220,240	186,503	18.1	109,657	94,403	16.2	213,386	181,057	17.9	(186,201)	-5.8	245.8	74,340	2.6	38.8	-350.5	4,750.8	5,643.6	-15.8	31.5	35.8	-12.0
1506	Medimed Medical Scheme	4,236	4,790	-11.6	11,111	12,601	-11.8	4,396	4,768	-7.8	11,544	12,602	-8.4	4,040	4.4	33.5	3,473	3.9	27.5	16.3	7,899.5	6,279.6	25.8	99.6	88.4	12.7
1140	Medshield Medical Scheme	73,031	72,719	0.4	173,638	175,044	-0.8	73,529	68,606	7.2	175,578	168,927	3.9	(137,619)	-9.2	613.8	(90,794)	-6.9	690.1	-51.6	4,424.3	4,731.2	-6.5	52.0	60.9	-14.6
1167	Momentum Health	81,645	80,780	1.1	180,352	179,464	0.5	80,303	77,489	3.6	177,765	172,990	2.8	(71,288)	-3.8	818.6	(46,519)	-2.8	-1,937.5	-53.2	1,682.9	1,768.1	-4.8	15.8	18.7	-15.5
1166	National Independent Medical Aid Society (NIMAS)	13,841	17,877	-22.6	29,740	40,793	-27.1	14,534	17,205	-15.5	31,547	39,312	-19.8	(10,692)	-3.1	702.3	(37,780)	-11.0	128.3	71.7	1,413.8	1,145.8	23.4	13.0	13.1	-0.8
1560	Openplan Medical Scheme	-	8,275	-100.0	-	16,722	-100.0	-	8,917	-100.0	-	18,194	-100.0	-	-	-	(16,888)	-7.5	305.7	100.0	-	4,514.3	-100.0	-	36.4	-100.0
1215	Oxygen Medical Scheme	58,477	71,857	-18.6	133,860	166,230	-19.5	63,518	74,687	-15.0	146,026	173,765	-16.0	(117,316)	-7.7	132.7	(60,787)	-3.9	328.1	-93.0	1,174.7	1,495.9	-21.5	11.2	16.6	-32.5
1587	Pathfinder Medical Scheme	-	1,447	-100.0	-	2,711	-100.0	-	1,627	-100.0	-	3,087	-100.0	-	-	-	(6,554)	-29.3	100.4	100.0	-	-2,376.8	100.0	-	-32.8	100.0
1546	Pharos Medical Plan	7,172	7,654	-6.3	16,659	17,739	-6.1	7,381	7,712	-4.3	17,192	17,954	-4.2	6,267	3.0	57.5	10,926	5.6	69.7	-42.6	2,584.6	1,868.0	38.4	21.2	17.1	24.0
1454	Pro Sano Medical Scheme	31,583	30,938	2.1	70,063	72,080	-2.8	31,237	31,051	0.6	70,842	73,269	-3.3	(108,365)	-13.8	222.1	(67,641)	-9.3	233.7	-60.2	3,102.2	3,606.5	-14.0	28.1	36.5	-23.0
1196	Protea Medical Aid Society	6,197	3,912	58.4	7,146	4,932	44.9	5,749	3,733	54.0	6,771	4,786	41.5	(11,376)	-23.6	127.7	(4,190)	-10.5	395.5	-171.5	1,350.8	3,793.2	-64.4	19.0	45.6	-58.3

## Annexure R: Operating results and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Average members			Average beneficiaries			Net healthcare result								Year-end reserve position			Solvency ratio		
2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	2009	% of GCI	% of net surplus (deficit)	2008	% of GCI	% of net surplus (deficit)	% growth	pab 2009	pab 2008	% growth	2009 %	2008 %	% growth		
Ref no.	Name of medical scheme											R'000														
Registered schemes: open continued																										
1170	Purehealth Medical Scheme	3,218	4,145	-22.4	6,631	8,858	-25.1	3,305	4,542	-27.2	6,844	9,863	-30.6	(3,051)	-2.3	443.6	6,476	4.0	68.5	-147.1	1,500.6	1,110.9	35.1	7.6	6.7	13.4
1586	Renaissance Health Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1575	Resolution Health Medical Scheme	33,111	40,623	-18.5	74,212	90,349	-17.9	36,152	41,215	-12.3	80,397	93,011	-13.6	(19,753)	-3.2	474.3	(8,753)	-1.4	-85.9	-125.7	1,226.4	1,104.9	11.0	16.0	16.1	-0.6
1446	Selfmed Medical Scheme	11,253	12,384	-9.1	23,639	26,907	-12.1	11,698	12,490	-6.3	24,892	27,413	-9.2	(14,448)	-5.0	-381.9	(28,375)	-10.2	352.4	49.1	5,046.6	4,539.5	11.2	43.1	44.6	-3.4
1486	Sizwe Medical Fund	62,034	65,230	-4.9	156,422	166,354	-6.0	63,107	64,250	-1.8	160,316	164,661	-2.6	(65,191)	-4.1	1,475.7	(32,607)	-2.2	-40.2	-99.9	3,758.1	3,620.8	3.8	38.3	40.8	-6.1
1141	Spectramed	49,031	65,577	-25.2	107,213	150,613	-28.8	55,527	69,181	-19.7	124,535	162,469	-23.3	(17,898)	-1.2	-423.6	(15,310)	-1.0	-158.5	-16.9	1,984.5	1,445.9	37.3	17.0	15.1	12.6
1464	Suremed Health	1,551	1,425	8.8	3,686	3,394	8.6	1,571	1,469	6.9	3,743	3,508	6.7	(1,998)	-4.9	-62.8	1,071	2.9	17.3	-286.6	8,289.8	7,938.3	4.4	76.3	75.9	0.5
1147	Telemed	24,844	27,951	-11.1	52,447	60,024	-12.6	25,496	28,143	-9.4	54,198	60,848	-10.9	25,718	2.7	55.6	(7,624)	-0.8	-103.8	437.3	2,395.0	1,373.2	74.4	13.5	9.1	48.4
1592	Thebemed	4,382	4,651	-5.8	14,733	15,337	-3.9	4,453	6,631	-32.8	14,845	21,595	-31.3	231	0.3	16.2	3,741	3.6	79.1	-93.8	814.1	493.6	64.9	14.3	10.1	41.6
1422	Topmed Medical Scheme	12,567	12,709	-1.1	26,847	27,435	-2.1	12,504	12,096	3.4	26,717	26,301	1.6	(17,245)	-5.8	345.3	(23,584)	-8.7	1,340.5	26.9	4,107.4	4,273.3	-3.9	37.0	41.3	-10.4
Sub-total: registered open schemes		2,144,369	2,136,960	0.3	4,815,334	4,888,906	-1.5	2,137,300	2,107,801	1.4	4,830,636	4,866,209	-0.7	(1,667,515)	-3.1	-590.6	(599,736)	-1.2	-41.2	-178.0	3,088.1	3,001.1	2.9	27.4	29.8	-8.1
Registered schemes: restricted																										
1005	AECI Medical Aid Society	7,323	7,466	-1.9	15,431	15,987	-3.5	7,383	7,462	-1.1	15,661	16,139	-3.0	(13,560)	-5.8	-2,144.8	(16,511)	-7.8	1,018.2	17.9	10,083.8	9,240.0	9.1	67.7	70.8	-4.4
1487	Afrisam SA Medical Scheme	1,149	1,320	-13.0	2,448	2,904	-15.7	1,209	1,366	-11.5	2,612	3,064	-14.8	(5,015)	-12.9	187.3	(4,632)	-10.9	380.6	-8.3	6,881.8	6,739.7	2.1	46.2	48.6	-4.9
1567	Afrox Medical Aid Society	3,276	3,457	-5.2	7,558	8,003	-5.6	3,436	3,266	5.2	7,938	7,731	2.7	(5,557)	-6.8	-22.7	(3,355)	-4.8	-50.7	-65.6	14,471.2	11,690.6	23.8	141.1	128.7	9.6
1456	Alliance Midmed Medical Scheme	1,866	2,016	-7.4	4,818	5,094	-5.4	1,892	1,995	-5.2	4,883	5,033	-3.0	(3,265)	-6.0	-158.4	1,112	2.1	19.7	-393.5	9,832.9	9,131.9	7.7	87.6	86.5	1.3
1534	Altron Medical Aid Scheme	4,236	4,859	-12.8	9,444	10,937	-13.7	4,487	5,275	-14.9	10,039	11,774	-14.7	(18,544)	-14.0	152.2	(3,842)	-2.7	-105.2	-382.6	3,875.4	4,229.6	-8.4	29.5	35.6	-17.1
1012	Anglo Medical Scheme	11,746	12,669	-7.3	26,918	29,967	-10.2	11,837	12,570	-5.8	27,242	29,842	-8.7	(35,701)	-9.0	-13.9	(33,338)	-8.8	76.1	-7.1	66,658.0	57,011.3	16.9	458.5	449.4	2.0
1571	Anglovaal Group Medical Scheme	4,289	4,239	1.2	8,805	8,775	0.3	4,280	4,195	2.0	8,804	8,691	1.3	(7,043)	-5.7	-1,005.3	(9,538)	-8.9	184.0	26.2	11,997.4	12,071.6	-0.6	85.1	97.4	-12.6
1279	Bankmed	100,505	102,627	-2.1	199,956	201,545	-0.8	101,113	103,038	-1.9	200,012	201,508	-0.7	(56,068)	-2.3	-99.9	(37,438)	-1.7	-35.7	-49.8	6,249.3	5,922.0	5.5	51.1	52.7	-3.0
1507	Barloworld Medical Scheme	5,865	5,977	-1.9	12,505	12,758	-2.0	5,969	5,823	2.5	12,696	12,465	1.8	(8,061)	-3.8	-121.4	735	0.4	7.6	-1,196.7	9,094.8	8,730.5	4.2	54.9	58.5	-6.2
1557	BHP Billiton SA Medical Scheme	-	-	-	-	-	-	-	3,756	-100.0	-	8,144	-100.0	-	-	-	(6,259)	-16.1	-152.3	100.0	-	-	-	-	-	-
1115	Biz Health Medical Scheme	-	-	-	-	-	-	-	828	-100.0	-	1,348	-100.0	-	-	-	(1,625)	-12.6	146.8	100.0	-	-	-	-	-	-
1526	BMW Employees Medical Aid Society	2,221	2,292	-3.1	6,137	6,325	-3.0	2,247	2,349	-4.4	6,211	6,525	-4.8	(8,620)	-12.9	-144.6	(17,208)	-27.0	130.3	49.9	8,519.3	7,195.8	18.4	79.4	73.7	7.7



## Annexure R: Operating results and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Average members			Average beneficiaries			Net healthcare result								Year-end reserve position			Solvency ratio		
Ref no.	Name of medical scheme	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	R'000	% of GCI	% of net surplus (deficit)	2008 R'000	% of GCI	% of net surplus (deficit)	% growth	pab 2009	pab 2008	% growth	2009 %	2008 %	% growth
Registered schemes: restricted continued																										
1237	BP Medical Aid Society	2,367	2,431	-2.6	5,360	5,588	-4.1	2,409	2,475	-2.7	5,482	5,708	-4.0	(17,075)	-27.8	38,273.8	(11,834)	-20.8	-243.4	-44.3	9,839.7	9,078.6	8.4	87.7	91.1	-3.7
1590	Building & Construction Industry Medical Aid Fund	5,036	5,017	0.4	12,654	12,399	2.1	5,049	4,885	3.4	12,423	11,964	3.8	488	0.9	11.0	2,144	4.5	36.7	-77.3	3,047.3	2,795.2	9.0	67.1	69.8	-3.9
1593	Built Environment Professional Associations Medical Scheme (BEPMED)	2,070	2,084	-0.7	4,770	4,818	-1.0	2,089	2,036	2.6	4,785	4,726	1.3	3,396	6.2	87.5	247	0.5	36.1	1,275.4	1,157.2	350.4	230.3	10.1	3.3	206.1
1158	Cawmed Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	23,768	22,621	5.1	41,262	38,952	5.9	23,886	22,259	7.3	40,913	38,226	7.0	(7,716)	-1.4	-60.3	16,946	3.5	44.4	-145.5	5,474.8	5,525.1	-0.9	39.4	43.6	-9.6
1521	Clicks Group Medical Scheme	644	1,179	-45.4	1,313	2,445	-46.3	835	1,468	-43.1	1,706	3,055	-44.2	(284)	-2.2	-64.3	2,486	12.7	73.2	-111.4	4,792.1	2,531.3	89.3	64.3	39.4	63.2
1068	De Beers Benefit Society	7,092	8,081	-12.2	15,980	18,954	-15.7	7,391	8,237	-10.3	16,901	19,550	-13.5	(20,212)	-9.0	-115.1	(18,489)	-8.8	-239.9	-9.3	17,085.8	15,122.6	13.0	129.1	141.1	-8.5
1484	Edcon Medical Aid Scheme	3,669	3,717	-1.3	7,358	7,384	-0.4	3,698	3,732	-0.9	7,391	7,417	-0.3	(4,332)	-5.5	207.3	(6,989)	-9.9	192.4	38.0	3,316.3	3,586.6	-7.5	31.1	37.8	-17.7
1572	Engen Medical Benefit Fund	3,551	3,432	3.5	8,257	8,098	2.0	3,495	3,363	3.9	8,169	8,010	2.0	(1,870)	-1.6	-46.2	2,040	2.0	28.9	-191.7	7,795.0	7,443.7	4.7	55.0	58.7	-6.3
1585	Eyethumed Medical Scheme	3,303	3,814	-13.4	6,736	7,902	-14.8	3,449	3,888	-11.3	7,008	8,102	-13.5	(7,404)	-21.9	191.5	(5,370)	-15.3	372.1	-37.9	3,158.2	3,209.1	-1.6	65.6	74.2	-11.6
1271	Fishing Industry Medical Scheme (Fishmed)	838	929	-9.8	2,145	2,319	-7.5	866	970	-10.7	2,214	2,428	-8.8	(276)	-6.6	-105.1	(1)	-	-0.2	-21,170.0	2,922.5	2,556.3	14.3	154.8	156.7	-1.2
1086	Food Workers Medical Benefit Fund	14,412	14,920	-3.4	19,838	20,639	-3.9	13,739	14,086	-2.5	19,030	19,931	-4.5	3,348	21.0	57.8	2,891	20.6	58.0	15.8	2,964.4	2,539.9	16.7	353.1	360.2	-2.0
1578	Foschini Group Medical Aid Scheme	2,632	2,351	12.0	5,468	4,827	13.3	2,517	2,292	9.8	5,179	4,711	9.9	(7,688)	-15.3	180.6	(3,148)	-7.3	-269.3	-144.2	6,450.6	7,994.7	-19.3	66.5	87.8	-24.3
1568	Gold Fields Medical Scheme	8,856	7,982	10.9	19,828	17,848	11.1	8,416	7,724	9.0	18,840	17,438	8.0	(11,261)	-6.8	1,126.2	(9,906)	-7.4	-970.3	-13.7	6,233.8	6,792.4	-8.2	71.1	88.2	-19.4
1270	Golden Arrow Employees Medical Benefit Fund	2,733	2,665	2.6	6,507	6,604	-1.5	2,740	2,546	7.6	6,623	6,321	4.8	(16,658)	-85.2	-11,160.6	(14,561)	-89.0	9,673.7	-14.4	2,946.8	3,064.3	-3.8	99.8	118.3	-15.6
1598	Government Employees Medical Scheme (GEMS)	409,804	300,536	36.4	1,147,897	824,738	39.2	357,596	253,525	41.0	991,872	692,820	43.2	180,868	2.0	68.7	445,610	8.0	87.6	-59.4	994.4	1,043.5	-4.7	11.1	12.9	-14.0
1523	Grintek Electronics Medical Aid Scheme	1,140	1,115	2.2	2,817	2,749	2.5	1,130	1,145	-1.3	2,787	2,861	-2.6	(5,756)	-20.1	188.5	(4,706)	-17.3	488.7	-22.3	9,381.0	10,205.5	-8.1	91.3	107.1	-14.8
1111	IBM (SA) Medical Scheme	2,243	2,233	0.4	5,086	5,082	0.1	2,239	2,163	3.5	5,106	4,996	2.2	(4,564)	-8.0	155.4	1,667	3.3	43.5	-373.8	3,016.8	3,670.9	-17.8	27.0	36.8	-26.6
1591	Impala Medical Plan	7,526	7,108	5.9	16,034	15,522	3.3	7,707	6,891	11.8	16,513	15,230	8.4	4,255	8.2	98.4	2,187	5.0	101.9	94.5	886.1	676.9	30.9	28.3	23.6	19.9
1559	Imperial Group Medical Scheme	6,118	5,874	4.2	14,526	14,063	3.3	5,962	6,179	-3.5	14,226	14,968	-5.0	(9,302)	-5.9	101.0	(1,469)	-1.0	-23.4	-533.2	10,718.0	10,733.0	-0.1	96.8	107.2	-9.7



## Annexure R: Operating results and solvency: registered schemes for the years ended 31 December 2008-2009

Members					Beneficiaries			Average members			Average beneficiaries			Net healthcare result								Year-end reserve position			Solvency ratio		
Ref no.	Name of medical scheme	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	R'000	% of GCI	% of net surplus (deficit)	2008 R'000	% of GCI	% of net surplus (deficit)	% growth	pab 2009	pab 2008	% growth	2009 %	2008 %	% growth	
Registered restricted continued																											
1145	LA-Health Medical Scheme	24,605	21,739	13.2	52,862	45,022	17.4	23,472	21,625	8.5	50,054	44,674	12.0	(7,412)	-1.0	-38.0	575	0.1	1.7	-1,388.0	4,754.9	4,900.4	-3.0	33.5	35.9	-6.7	
1197	Libcare Medical Scheme	5,702	5,476	4.1	12,830	12,477	2.8	5,633	5,380	4.7	12,785	12,268	4.2	(4,944)	-2.9	-61.6	(11,220)	-8.1	98.5	55.9	10,278.0	10,056.4	2.2	77.1	88.9	-13.3	
1599	Lonmin Medical Scheme	13,840	12,772	8.4	14,792	13,428	10.2	13,710	12,852	6.7	14,538	13,315	9.2	678	1.0	17.3	315	0.5	8.3	115.1	923.9	714.9	29.2	19.0	16.1	18.0	
1547	Malcor Medical Scheme	4,599	4,266	7.8	10,512	9,773	7.6	4,469	4,223	5.8	10,181	9,738	4.6	(19,682)	-15.3	-592.9	(19,479)	-17.3	-24,908.9	-1.0	3,453.6	3,269.9	5.6	27.4	28.3	-3.2	
1042	Mascom Medical Scheme	-	716	-100.0	-	1,121	-100.0	-	732	-100.0	-	1,158	-100.0	-	-	-	(8,114)	-35.7	142.7	100.0	-	5,281.7	-100.0	-	26.9	-100.0	
1495	Massmart Health Plan	2,189	2,018	8.5	4,797	4,392	9.2	2,140	1,873	14.3	4,655	4,065	14.5	(3,557)	-5.3	-181.8	1,965	3.6	25.9	-281.0	10,293.4	10,983.9	-6.3	71.8	82.6	-13.1	
1039	MBMed Medical Aid Fund	3,303	3,700	-10.7	8,746	9,725	-10.1	3,466	3,724	-6.9	9,139	9,778	-6.5	(11,989)	-13.8	354.3	(1,674)	-2.0	-38.3	-616.2	6,226.5	6,165.7	1.0	65.5	70.8	-7.5	
1588	MEDCOR	15,922	26,568	-40.1	40,513	73,093	-44.6	20,544	27,608	-25.6	54,138	76,203	-29.0	(84,496)	-15.6	118.3	(49,673)	-7.8	179.1	-70.1	1,090.8	1,712.6	-36.3	10.9	20.6	-47.1	
1548	Medipos Medical Scheme	10,702	10,743	-0.4	23,131	23,347	-0.9	10,733	10,267	4.5	23,239	22,559	3.0	(21,610)	-7.7	-171.0	(17,310)	-7.2	-32.7	-24.8	11,074.0	11,091.0	-0.2	91.8	104.0	-11.7	
1535	Metrocare	1,484	1,636	-9.3	3,584	3,995	-10.3	1,552	1,671	-7.2	3,775	4,120	-8.4	(6,202)	-11.8	-242.6	(80)	-0.2	-1.1	-7,699.0	24,665.3	21,978.1	12.2	176.8	175.1	1.0	
1105	Metropolitan Medical Scheme	5,734	5,547	3.4	13,704	13,476	1.7	5,580	5,267	5.9	13,442	12,930	4.0	(9,941)	-7.8	-540.6	(2,658)	-2.4	-31.0	-273.9	6,534.0	6,650.1	-1.7	69.2	76.1	-9.1	
1569	Minemed Medical Scheme	6,598	6,481	1.8	14,595	14,511	0.6	6,730	6,417	4.9	14,959	14,529	3.0	(7,492)	-4.3	102.8	(20,718)	-14.7	116.4	63.8	1,338.9	1,880.1	-28.8	11.5	19.4	-40.7	
1566	Moremed Medical Scheme	1,380	1,439	-4.1	2,446	2,589	-5.5	1,408	1,420	-0.8	2,514	2,635	-4.6	(2,740)	-22.7	169.7	(3,338)	-31.8	176.1	17.9	3,138.8	3,607.0	-13.0	65.4	90.5	-27.7	
1600	Motohealth Care	39,116	54,562	-28.3	90,896	128,103	-29.0	42,907	54,641	-21.5	99,783	127,804	-21.9	(7,320)	-0.9	-47.6	(90,382)	-11.0	94.0	91.9	3,315.1	2,467.9	34.3	38.5	38.4	0.3	
1154	Nampak SA Medical Scheme	5,250	5,159	1.8	12,504	12,435	0.6	5,220	5,139	1.6	12,451	12,546	-0.8	(12,139)	-7.7	-148.4	1,391	1.0	11.0	-972.7	8,223.0	8,510.5	-3.4	64.7	74.4	-13.0	
1241	Naspers Medical Fund	6,444	6,709	-3.9	12,795	13,245	-3.4	6,630	6,805	-2.6	13,187	13,403	-1.6	(27,549)	-17.9	223.9	(18,297)	-12.5	145.3	-50.6	6,012.4	6,961.7	-13.6	51.5	63.9	-19.4	
1469	Nedgroup Medical Aid Scheme	24,963	25,247	-1.1	48,895	49,473	-1.2	25,047	25,064	-0.1	48,932	49,451	-1.1	(49,380)	-9.7	-133.1	(40,518)	-8.9	-245.4	-21.9	4,700.1	4,405.8	6.7	45.1	47.6	-5.3	
1584	Netcare Medical Scheme	15,780	14,722	7.2	36,709	33,984	8.0	15,279	14,429	5.9	35,414	33,275	6.4	1,630	0.4	6.0	15,217	4.0	41.1	-89.3	6,473.6	6,247.9	3.6	54.0	55.2	-2.2	
1214	Old Mutual Staff Medical Aid Fund	14,422	14,671	-1.7	30,098	31,226	-3.6	14,564	14,457	0.7	30,632	31,164	-1.7	(18,576)	-6.1	431.7	(31,870)	-11.9	170.7	41.7	4,065.9	4,134.5	-1.7	41.0	48.0	-14.6	
1441	Parmed Medical Aid Scheme	2,304	2,075	11.0	5,619	5,168	8.7	2,220	2,078	6.8	5,433	5,276	3.0	8,491	6.3	52.1	5,437	4.8	40.1	56.2	16,294.5	13,688.8	19.0	65.7	64.2	2.3	
1515	PG Bison Medical Aid Society	635	703	-9.7	1,368	1,521	-10.1	656	765	-14.2	1,412	1,704	-17.1	165	0.8	6.9	2,638	11.5	51.7	-93.8	19,462.4	14,728.7	32.1	136.2	109.7	24.2	
1186	PG Group Medical Scheme	1,239	1,286	-3.7	2,641	2,754	-4.1	1,267	1,259	0.7	2,714	2,693	0.8	527	1.2	6.7	401	1.0	7.5	31.4	17,864.7	16,175.6	10.4	110.3	110.1	0.2	
1563	Pick & Pay Medical Scheme	7,695	7,416	3.8	16,324	15,625	4.5	7,618	7,127	6.9	16,048	15,030	6.8	7,868	4.4	48.8	2,843	1.9	16.1	176.7	9,095.2	8,639.6	5.3	81.1	85.4	-5.0	
1583	Platinum Health	31,798	31,389	1.3	55,247	53,914	2.5	31,479	30,554	3.0	54,800	51,929	5.5	(68,248)	-21.0	249.8	(19,012)	-6.8	-77.9	-259.0	1,898.0	2,569.8	-26.1	32.0	47.4	-32.5	
1194	Profmed	24,546	23,939	2.5	61,994	61,556	0.7	24,313	23,861	1.9	61,661	61,625	0.1	(33,611)	-5.1	2,456.9	(17,727)	-3.0	-438.1	-89.6	4,867.9	4,892.9	-0.5	45.1	51.5	-12.4	
1516	Quantum Medical Aid Society	6,948	7,110	-2.3	14,510	14,836	-2.2	6,968	7,139	-2.4	14,576	14,951	-2.5	(11,145)	-9.0	1,122.9	(15,641)	-13.8	-607.0	28.7	9,685.5	9,508.8	1.9	114.6	125.3	-8.5	
1201	Rand Water Medical Scheme	2,900	2,820	2.8	7,220	6,967	3.6	2,883	2,816	2.4	7,174	6,948	3.2	(7,828)	-8.8	21,762.0	(3,672)	-4.5	-59.0	-113.2	11,944.0	12,337.3	-3.2	95.9	106.0	-9.5	
1430	Remedi Medical Aid Scheme	15,484	14,568	6.3	35,720	33,655	6.1	15,183	14,328	6.0	35,023	33,152	5.6	4,711	1.0	22.4	(995)	-0.3	-5.0	573.3	6,330.1	5,947.1	6.4	49.2	50.8	-3.1	
1176	Retail Medical Scheme	6,951	5,963	16.6	13,120	11,584	13.3	6,668	5,531	20.5	12,644	10,897	16.0	4,148	3.7	32.4	11,144	11.4	56.9	-62.8	8,750.7	8,979.1	-2.5	98.5	99.9	-1.4	

## Annexure R: Operating results and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Average members			Average beneficiaries			Net healthcare result								Year-end reserve position			Solvency ratio		
Ref no.	Name of medical scheme	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	R'000	% of GCI	% of net surplus (deficit)	2008 R'000	% of GCI	% of net surplus (deficit)	% growth	pab 2009	pab 2008	% growth	2009 %	2008 %	% growth
Registered schemes: restricted continued																										
1013	Rhodes University Medical Scheme	1,004	971	3.4	2,164	2,068	4.6	991	952	4.1	2,125	2,018	5.3	72	0.3	3.7	(279)	-1.4	-14.3	125.8	10,150.3	9,733.5	4.3	93.1	100.2	-7.1
1209	SA Breweries Medical Aid Society	9,435	9,095	3.7	21,514	20,954	2.7	9,307	8,835	5.3	21,352	20,467	4.3	(1,630)	-0.7	-8.1	6,471	3.3	34.6	-125.2	9,289.3	8,708.7	6.7	87.5	90.1	-2.9
1424	SABC Medical Aid Scheme	4,604	4,601	0.1	10,058	9,954	1.0	4,644	4,429	4.8	10,062	9,659	4.2	(7,088)	-4.7	-3,275.3	1,991	1.5	20.8	-456.1	7,661.3	7,958.5	-3.7	50.8	57.3	-11.3
1038	SAMWUMed	30,271	28,500	6.2	73,084	70,764	3.3	29,983	27,129	10.5	72,991	68,429	6.7	57,482	11.8	68.9	(37,536)	-10.5	315.3	253.1	3,995.7	3,042.0	31.4	59.8	58.4	2.4
1527	Sappi Medical Aid Scheme	4,086	4,141	-1.3	9,443	9,702	-2.7	4,125	4,128	-0.1	9,584	9,702	-1.2	(4,583)	-3.3	-174.6	(2,835)	-2.3	-53.2	-61.7	6,216.9	5,870.4	5.9	42.8	45.7	-6.3
1234	Sasolmed	28,227	27,519	2.6	74,603	73,396	1.6	27,916	24,562	13.7	73,443	65,561	12.0	24,640	2.6	38.6	45,846	5.9	53.0	-46.3	5,948.2	5,668.3	4.9	46.7	47.7	-2.1
1531	Sedmed	865	861	0.5	2,023	2,037	-0.7	871	858	1.5	2,035	2,042	-0.4	(230)	-1.3	-13.9	1,316	8.0	43.5	-117.5	6,092.9	5,259.8	15.8	69.2	65.5	5.6
1243	Siemens Medical Scheme	2,965	3,005	-1.3	6,744	6,783	-0.6	2,985	2,991	-0.2	6,748	6,782	-0.5	(11,104)	-11.5	244.8	(8,920)	-9.8	300.9	-24.5	7,454.6	8,086.0	-7.8	52.0	60.4	-13.9
1589	Solvita Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1580	South African Police Service Medical Scheme (POLMED)	168,576	160,240	5.2	472,313	460,398	2.6	166,903	159,375	4.7	471,285	456,137	3.3	(238,929)	-5.6	301.8	(63,197)	-1.7	-52.4	-278.1	2,650.3	2,945.4	-10.0	29.2	35.7	-18.2
1254	Stocksmed	860	921	-6.6	1,846	1,996	-7.5	892	917	-2.8	1,910	1,984	-3.7	(4,893)	-17.7	242.5	(3,686)	-14.5	2,884.6	-32.7	13,396.9	13,914.1	-3.7	92.4	108.7	-15.0
1544	Tiger Brands Medical Scheme	4,972	5,011	-0.8	11,482	11,539	-0.5	5,014	5,061	-0.9	11,576	11,675	-0.9	(7,911)	-5.1	-583.5	(17,038)	-12.4	278.3	53.6	6,934.5	6,759.4	2.6	51.6	57.5	-10.3
1582	Transmed Medical Fund	73,523	75,845	-3.1	144,286	150,102	-3.9	74,705	76,060	-1.8	146,985	152,147	-3.4	(219,217)	-17.0	127.8	(138,978)	-11.1	190.5	-57.7	2,531.4	3,409.1	-25.7	28.9	41.6	-30.5
1579	Tsogo Sun Group Medical Scheme	3,081	2,792	10.4	6,482	5,961	8.7	2,940	2,781	5.7	6,243	5,926	5.3	329	0.5	6.9	(9)	-	-0.2	3,686.7	7,717.0	7,319.9	5.4	74.7	77.1	-3.1
1434	Umed	8,016	8,160	-1.8	18,583	19,299	-3.7	8,071	8,233	-2.0	18,843	19,644	-4.1	(6,072)	-2.2	-76.9	(25,340)	-10.7	324.5	76.0	6,680.4	6,108.1	9.4	46.6	50.7	-8.1
1597	Umvuzo Health Medical Scheme	16,808	20,687	-18.8	31,584	35,867	-11.9	17,365	20,386	-14.8	32,209	35,180	-8.4	1,486	0.9	34.3	6,629	4.0	67.9	-77.6	762.3	574.9	32.6	14.5	12.4	16.9
1520	University of Kwa-Zulu Natal Medical Scheme	3,331	3,497	-4.7	7,188	7,532	-4.6	3,258	3,432	-5.1	7,022	7,364	-4.6	(8,139)	-10.0	-4,721.8	1,425	1.8	13.5	-671.3	8,911.8	8,474.8	5.2	77.1	81.0	-4.8
1282	University of the Witwatersrand Staff Medical Aid Scheme	3,031	2,909	4.2	6,340	6,200	2.3	2,973	2,897	2.6	6,270	6,244	0.4	(5,071)	-5.3	960.6	(2,150)	-2.6	-33.6	-135.9	8,865.2	8,986.6	-1.4	58.1	67.7	-14.2
1291	Witbank Coalfields Medical Aid Scheme	10,460	10,008	4.5	26,005	25,236	3.0	10,308	9,152	12.6	25,817	23,208	11.2	9,765	3.7	27.5	5,309	2.4	16.5	83.9	10,937.5	10,634.7	2.8	106.7	109.4	-2.5
1293	Wooltru Healthcare Fund	8,876	8,761	1.3	18,263	18,037	1.3	8,829	8,745	1.0	18,153	18,170	-0.1	(12,433)	-7.5	-486.5	(16,288)	-10.9	-3,714.4	23.7	7,862.3	7,714.2	1.9	85.8	93.8	-8.5
1253	Xstrata Medical Aid Scheme	7,838	7,647	2.5	23,138	21,874	5.8	7,668	7,250	5.8	22,356	20,607	8.5	(15,595)	-10.4	206.7	(3,046)	-2.3	-91.1	-411.9	2,411.5	2,982.4	-19.1	35.9	47.3	-24.1

## Annexure R: Operating results and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Average members			Average beneficiaries			Net healthcare result							Year-end reserve position			Solvency ratio			
Ref no.	Name of medical scheme	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	2009	2008	% growth	R'000	% of GCI	% of net surplus (deficit)	2008	% of GCI	% of net surplus (deficit)	% growth	pab 2009	pab 2008	% growth	2009 %	2008 %	% growth
Registered schemes: restricted continued																										
Sub-total: registered restricted schemes		1,343,640	1,251,622	7.4	3,253,171	2,985,920	9.0	1,297,145	1,199,010	8.2	3,115,571	2,843,488	9.6	(920,245)	-3.0	-135.0	(312,923)	-1.2	-31.9	-194.1	4,160.7	4,389.9	-5.2	42.5	49.7	-14.5
Total registered schemes		3,488,009	3,388,582	2.9	8,068,505	7,874,826	2.5	3,434,445	3,306,811	3.9	7,946,207	7,709,697	3.1	(2,587,760)	-3.0	-268.5	(912,659)	-1.2	-37.5	-183.5	3,508.6	3,513.3	-0.1	32.9	36.6	-10.1

### Notes

Prior year figures have been restated.

GCI = Gross Contribution Income

pab = per average beneficiary

The scheme liquidated in 2008. No figures were submitted at the time of finalising the Annual Report.

Cawmed Medical Scheme was liquidated with effect from 1 September 2008.

The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.

Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.

The schemes liquidated in 2008 and 2009. Figures were submitted.

Biz Health Medical Scheme was liquidated with effect from 30 April 2008.

Mascom Medical Scheme was liquidated with effect from 31 December 2008.

Purehealth Medical Scheme was liquidated with effect from 31 December 2009.

Stocksmed was liquidated with effect from 31 December 2009.

The scheme was deregistered in 2008.

Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.

The following schemes amalgamated in 2008 and 2009:

Global Health amalgamated with Munimed with effect from 1 January 2008.

Cimas Wellness Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.

Lifemed Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.

Meridian Health amalgamated with Momentum Health with effect from 1 January 2008.

BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.

Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009.

The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.



## Annexure S: Gross contribution income and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Gross Contribution Income (GCI)			Gross Contribution Income (GCI)			Solvency ratio			
Average 2009		Average 2008	% growth	Average 2009	Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 %	2008 %	% growth	
Ref. no.	Name of medical scheme															
Registered schemes: open																
I252	Bestmed Medical Scheme	39,320	35,808	9.8	88,758	85,833	3.4	1,038,682	891,094	16.6	975.2	865.1	12.7	43.4	48.5	-10.5
I512	Bonitas Medical Fund	274,327	250,270	9.6	641,674	595,361	7.8	6,193,402	5,143,355	20.4	804.3	719.9	11.7	35.7	47.3	-24.5
I034	Cape Medical Plan	6,903	7,176	-3.8	15,378	16,002	-3.9	121,796	114,903	6.0	660.0	598.4	10.3	129.8	136.8	-5.1
I552	Community Medical Aid Scheme (COMMED)	14,075	11,492	22.5	34,235	29,661	15.4	376,585	270,959	39.0	916.7	761.3	20.4	19.7	35.5	-44.5
I491	Compicare Wellness Medical Scheme	13,835	14,797	-6.5	31,844	34,484	-7.7	437,415	409,998	6.7	1,144.7	990.8	15.5	27.9	39.6	-29.5
I125	Discovery Health Medical Scheme	893,411	850,636	5.0	1,996,866	1,928,108	3.6	23,840,326	20,796,701	14.6	994.9	898.8	10.7	25.5	25.4	0.4
I202	Fedhealth Medical Scheme	86,797	81,670	6.3	189,259	185,213	2.2	2,257,014	1,931,393	16.9	993.8	869.0	14.4	25.8	28.2	-8.5
I554	Genesis Medical Scheme	7,305	7,861	-7.1	21,263	23,168	-8.2	163,014	161,462	1.0	638.9	580.8	10.0	106.2	90.1	17.9
I561	Gen-Health Medical Scheme	11,692	10,579	10.5	28,345	25,780	10.0	244,634	192,556	27.0	719.2	622.4	15.6	21.5	49.2	-56.3
I466	Good Hope Medical Aid Society	3,395	3,406	-0.3	8,769	9,527	-8.0	39,962	37,591	6.3	379.8	328.8	15.5	110.2	109.8	0.4
I537	Hosmed Medical Aid Scheme	30,633	30,466	0.5	91,854	99,856	-8.0	836,451	788,145	6.1	758.9	657.7	15.4	12.4	11.1	11.7
I556	Humanity Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I577	Ingwe Health Plan	17,217	18,779	-8.3	24,841	29,928	-17.0	154,780	173,636	-10.9	519.2	483.5	7.4	12.0	9.5	26.3
I087	Keyhealth	45,718	52,920	-13.6	105,817	125,652	-15.8	1,516,489	1,544,299	-1.8	1,194.3	1,024.2	16.6	14.7	17.9	-17.9
I576	Liberty Health Medical Scheme	44,531	46,928	-5.1	94,969	100,949	-5.9	1,073,064	1,048,093	2.4	941.6	865.2	8.8	19.5	22.8	-14.5
I549	Medicover	44,025	54,800	-19.7	109,630	141,079	-22.3	995,419	1,059,586	-6.1	756.7	625.9	20.9	39.2	36.9	6.2
I149	Medihelp	109,657	94,403	16.2	213,386	181,057	17.9	3,221,220	2,850,915	13.0	1,258.0	1,312.2	-4.1	31.5	35.8	-12.0
I506	Medimed Medical Scheme	4,396	4,768	-7.8	11,544	12,602	-8.4	91,593	89,501	2.3	661.2	591.8	11.7	99.6	88.4	12.7
I140	Medshield Medical Scheme	73,529	68,606	7.2	175,578	168,927	3.9	1,493,498	1,312,172	13.8	708.8	647.3	9.5	52.0	60.9	-14.6
I167	Momentum Health	80,303	77,489	3.6	177,765	172,990	2.8	1,895,927	1,637,123	15.8	888.8	788.6	12.7	15.8	18.7	-15.5
I166	National Independent Medical Aid Society (NIMAS)	14,534	17,205	-15.5	31,547	39,312	-19.8	343,395	343,667	-0.1	907.1	728.5	24.5	13.0	13.1	-0.8
I560	Openplan Medical Scheme	-	8,917	-100.0	-	18,194	-100.0	-	225,847	-100.0	-	1,034.5	-100.0	-	36.4	-100.0
I215	Oxygen Medical Scheme	63,518	74,687	-15.0	146,026	173,765	-16.0	1,525,723	1,567,064	-2.6	870.7	751.5	15.9	11.2	16.6	-32.5
I587	Pathfinder Medical Scheme	-	1,627	-100.0	-	3,087	-100.0	-	22,382	-100.0	-	604.2	-100.0	-	-32.8	100.0
I546	Pharos Medical Plan	7,381	7,712	-4.3	17,192	17,954	-4.2	209,181	196,607	6.4	1,013.9	912.6	11.1	21.2	17.1	24.0
I454	Pro Sano Medical Scheme	31,237	31,051	0.6	70,842	73,269	-3.3	783,496	724,066	8.2	921.6	823.5	11.9	28.1	36.5	-23.0

## Annexure S: Gross contribution income and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Gross Contribution			Gross Contribution			Solvency			
								Income (GCI)				Income (GCI)		ratio		
		Average	Average	%	Average	Average	%	2009	2008	%	2009	2008	%	2009	2008	%
		2009	2008	growth	2009	2008	growth	R'000	R'000	growth	pabpm	pabpm	growth	%	%	growth
Ref. no.	Name of medical scheme										R	R				
Registered schemes:																
open continued																
I196	Protea Medical Aid Society	5,749	3,733	54.0	6,771	4,786	41.5	48,261	39,810	21.2	594.0	693.2	-14.3	19.0	45.6	-58.3
I170	Purehealth Medical Scheme	3,305	4,542	-27.2	6,844	9,863	-30.6	134,685	163,257	-17.5	1,640.0	1,379.3	18.9	7.6	6.7	13.4
I586	Renaissance Health Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I575	Resolution Health Medical Scheme	36,152	41,215	-12.3	80,397	93,011	-13.6	617,459	638,734	-3.3	640.0	572.3	11.8	16.0	16.1	-0.6
I446	Selfmed Medical Scheme	11,698	12,490	-6.3	24,892	27,413	-9.2	291,256	278,770	4.5	975.1	847.4	15.1	43.1	44.6	-3.4
I486	Sizwe Medical Fund	63,107	64,250	-1.8	160,316	164,661	-2.6	1,574,519	1,460,728	7.8	818.4	739.3	10.7	38.3	40.8	-6.1
I141	Spectramed	55,527	69,181	-19.7	124,535	162,469	-23.3	1,454,014	1,555,929	-6.6	973.0	798.1	21.9	17.0	15.1	12.6
I464	Suremed Health	1,571	1,469	6.9	3,743	3,508	6.7	40,693	36,697	10.9	906.0	871.8	3.9	76.3	75.9	0.5
I147	Telemed	25,496	28,143	-9.4	54,198	60,848	-10.9	959,102	918,897	4.4	1,474.7	1,258.5	17.2	13.5	9.1	48.4
I592	Thebemed	4,453	6,631	-32.8	14,845	21,595	-31.3	84,487	105,350	-19.8	474.3	406.5	16.7	14.3	10.1	41.6
I422	Topmed Medical Scheme	12,504	12,096	3.4	26,717	26,301	1.6	296,631	272,168	9.0	925.2	862.4	7.3	37.0	41.3	-10.4
Sub-total: registered open schemes		2,137,300	2,107,801	1.4	4,830,636	4,866,209	-0.7	54,354,174	49,003,457	10.9	937.7	839.2	11.7	27.4	29.8	-8.1
Registered schemes: restricted																
I005	AECI Medical Aid Society	7,383	7,462	-1.1	15,661	16,139	-3.0	233,200	210,690	10.7	1,240.9	1,087.9	14.1	67.7	70.8	-4.4
I487	Afrisam SA Medical Scheme	1,209	1,366	-11.5	2,612	3,064	-14.8	38,905	42,507	-8.5	1,241.3	1,156.0	7.4	46.2	48.6	-4.9
I567	Afrox Medical Aid Society	3,436	3,266	5.2	7,938	7,731	2.7	81,410	70,215	15.9	854.6	756.9	12.9	141.1	128.7	9.6
I456	Alliance Midmed Medical Scheme	1,892	1,995	-5.2	4,883	5,033	-3.0	54,818	53,103	3.2	935.5	879.3	6.4	87.6	86.5	1.3
I534	Altron Medical Aid Scheme	4,487	5,275	-14.9	10,039	11,774	-14.7	132,016	139,835	-5.6	1,095.9	989.7	10.7	29.5	35.6	-17.1
I012	Anglo Medical Scheme	11,837	12,570	-5.8	27,242	29,842	-8.7	396,055	378,558	4.6	1,211.5	1,057.1	14.6	458.5	449.4	2.0
I571	Anglovaal Group Medical Scheme	4,280	4,195	2.0	8,804	8,691	1.3	124,106	107,743	15.2	1,174.8	1,033.0	13.7	85.1	97.4	-12.6
I279	Bankmed	101,113	103,038	-1.9	200,012	201,508	-0.7	2,446,403	2,265,426	8.0	1,019.3	936.9	8.8	51.1	52.7	-3.0
I507	Barloworld Medical Scheme	5,969	5,823	2.5	12,696	12,465	1.8	210,280	186,049	13.0	1,380.3	1,243.8	11.0	54.9	58.5	-6.2
I557	BHP Billiton SA Medical Scheme	-	3,756	-100.0	-	8,144	-100.0	-	38,957	-100.0	-	398.6	-100.0	-	-	-
I115	Biz Health Medical Scheme	-	828	-100.0	-	1,348	-100.0	-	12,891	-100.0	-	797.1	-100.0	-	-	-





## Annexure S: Gross contribution income and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Gross Contribution Income (GCI)			Gross Contribution Income (GCI)			Solvency ratio			
Average 2009		Average 2008	% growth	Average 2009	Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 %	2008 %	% growth	
Ref. no.	Name of medical scheme															
Registered schemes: restricted continued																
1526	BMW Employees Medical Aid Society	2,247	2,349	-4.4	6,211	6,525	-4.8	66,666	63,751	4.6	894.4	814.2	9.9	79.4	73.7	7.7
1237	BP Medical Aid Society	2,409	2,475	-2.7	5,482	5,708	-4.0	61,496	56,866	8.1	934.9	830.2	12.6	87.7	91.1	-3.7
1590	Building & Construction Industry Medical Aid Fund	5,049	4,885	3.4	12,423	11,964	3.8	56,452	47,902	17.8	378.7	333.7	13.5	67.1	69.8	-3.9
1593	Built Environment Professional Associations Medical Scheme (BEPS)	2,089	2,036	2.6	4,785	4,726	1.3	54,918	49,788	10.3	956.4	878.0	8.9	10.1	3.3	206.1
1158	Cawmed Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	23,886	22,259	7.3	40,913	38,226	7.0	568,530	484,145	17.4	1,158.0	1,055.4	9.7	39.4	43.6	-9.6
1521	Clicks Group Medical Scheme	835	1,468	-43.1	1,706	3,055	-44.2	12,705	19,642	-35.3	620.6	535.9	15.8	64.3	39.4	63.2
1068	De Beers Benefit Society	7,391	8,237	-10.3	16,901	19,550	-13.5	223,640	209,545	6.7	1,102.7	893.2	23.5	129.1	141.1	-8.5
1484	Edcon Medical Aid Scheme	3,698	3,732	-0.9	7,391	7,417	-0.3	78,707	70,458	11.7	887.4	791.6	12.1	31.1	37.8	-17.7
1572	Engen Medical Benefit Fund	3,495	3,363	3.9	8,169	8,010	2.0	115,706	101,543	13.9	1,180.4	1,056.5	11.7	55.0	58.7	-6.3
1585	Eyethumed Medical Scheme	3,449	3,888	-11.3	7,008	8,102	-13.5	33,755	35,026	-3.6	401.4	360.2	11.4	65.6	74.2	-11.6
1271	Fishing Industry Medical Scheme (Fishmed)	866	970	-10.7	2,214	2,428	-8.8	4,178	3,962	5.5	157.3	136.0	15.7	154.8	156.7	-1.2
1086	Food Workers Medical Benefit Fund	13,739	14,086	-2.5	19,030	19,931	-4.5	15,976	14,053	13.7	70.0	58.8	19.0	353.1	360.2	-2.0
1578	Foschini Group Medical Aid Scheme	2,517	2,292	9.8	5,179	4,711	9.9	50,226	42,911	17.0	808.2	759.0	6.5	66.5	87.8	-24.3
1568	Gold Fields Medical Scheme	8,416	7,724	9.0	18,840	17,438	8.0	165,107	134,270	23.0	730.3	641.6	13.8	71.1	88.2	-19.4
1270	Golden Arrow Employees Medical Benefit Fund	2,740	2,546	7.6	6,623	6,321	4.8	19,550	16,370	19.4	246.0	215.8	14.0	99.8	118.3	-15.6
1598	Government Employees Medical Scheme (GEMS)	357,596	253,525	41.0	991,872	692,820	43.2	8,898,964	5,599,265	58.9	747.7	673.5	11.0	11.1	12.9	-14.0
1523	Grintek Electronics Medical Aid Scheme	1,130	1,145	-1.3	2,787	2,861	-2.6	28,624	27,269	5.0	856.0	794.3	7.8	91.3	107.1	-14.8
1111	IBM (SA) Medical Scheme	2,239	2,163	3.5	5,106	4,996	2.2	56,989	49,891	14.2	930.2	832.2	11.8	27.0	36.8	-26.6
1591	Impala Medical Plan	7,707	6,891	11.8	16,513	15,230	8.4	51,648	43,760	18.0	260.6	239.4	8.9	28.3	23.6	19.9

## Annexure S: Gross contribution income and solvency: registered schemes for the years ended 31 December 2008-2009

		Members			Beneficiaries			Gross Contribution Income (GCI)			Gross Contribution Income (GCI)			Solvency ratio		
		Average 2009	Average 2008	% growth	Average 2009	Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 %	2008 %	% growth
Ref. no.	Name of medical scheme															
<b>Registered schemes:</b>																
<b>restricted continued</b>																
1559	Imperial Group Medical Scheme	5,962	6,179	-3.5	14,226	14,968	-5.0	157,483	149,903	5.1	922.5	834.6	10.5	96.8	107.2	-9.7
1145	LA-Health Medical Scheme	23,472	21,625	8.5	50,054	44,674	12.0	710,059	609,373	16.5	1,182.1	1,136.7	4.0	33.5	35.9	-6.7
1197	Libcare Medical Scheme	5,633	5,380	4.7	12,785	12,268	4.2	170,493	138,755	22.9	1,111.3	942.5	17.9	77.1	88.9	-13.3
1599	Lonmin Medical Scheme	13,710	13	6.7	14,538	13	9.2	70,764	59,136	19.7	405.6	370.1	9.6	19.0	16.1	18.0
1547	Malcor Medical Scheme	4,469	4,223	5.8	10,181	9,738	4.6	128,416	112,676	14.0	1,051.1	964.3	9.0	27.4	28.3	-3.2
1042	Mascom Medical Scheme	-	732	-100.0	-	1,158	-100.0	-	22,711	-100.0	-	1,633.9	-100.0	-	26.9	-100.0
1495	Massmart Health Plan	2,140	1,873	14.3	4,655	4,065	14.5	66,777	54,045	23.6	1,195.4	1,107.9	7.9	71.8	82.6	-13.1
1039	MBMed Medical Aid Fund	3,466	3,724	-6.9	9,139	9,778	-6.5	86,869	85,099	2.1	792.1	725.3	9.2	65.5	70.8	-7.5
1588	MEDCOR	20,544	27,608	-25.6	54,138	76,203	-29.0	540,934	633,534	-14.6	832.6	692.8	20.2	10.9	20.6	-47.1
1548	Medipos Medical Scheme	10,733	10,267	4.5	23,239	22,559	3.0	280,334	240,544	16.5	1,005.2	888.6	13.1	91.8	104.0	-11.7
1535	Metrocare	1,552	1,671	-7.2	3,775	4,120	-8.4	52,669	51,711	1.9	1,162.8	1,046.0	11.2	176.8	175.1	1.0
1105	Metropolitan Medical Scheme	5,580	5,267	5.9	13,442	12,930	4.0	126,981	112,992	12.4	787.2	728.2	8.1	69.2	76.1	-9.1
1569	Minemed Medical Scheme	6,730	6,417	4.9	14,959	14,529	3.0	174,487	141,134	23.6	972.0	809.5	20.1	11.5	19.4	-40.7
1566	Moremed Medical Scheme	1,408	1,420	-0.8	2,514	2,635	-4.6	12,067	10,500	14.9	400.1	332.1	20.5	65.4	90.5	-27.7
1600	Motohealth Care	42,907	54,641	-21.5	99,783	127,804	-21.9	859,269	821,090	4.6	717.6	535.4	34.0	38.5	38.4	0.3
1154	Nampak SA Medical Scheme	5,220	5,139	1.6	12,451	12,546	-0.8	158,213	143,441	10.3	1,058.9	952.8	11.1	64.7	74.4	-13.0
1241	Naspers Medical Fund	6,630	6,805	-2.6	13,187	13,403	-1.6	153,821	145,977	5.4	972.0	907.6	7.1	51.5	63.9	-19.4
1469	Nedgroup Medical Aid Scheme	25,047	25,064	-0.1	48,932	49,451	-1.1	509,512	457,711	11.3	867.7	771.3	12.5	45.1	47.6	-5.3
1584	Netcare Medical Scheme	15,279	14,429	5.9	35,414	33,275	6.4	424,296	376,669	12.6	998.4	943.3	5.8	54.0	55.2	-2.2
1214	Old Mutual Staff Medical Aid Fund	14,564	14,457	0.7	30,632	31,164	-1.7	303,486	268,458	13.0	825.6	717.9	15.0	41.0	48.0	-14.6
1441	Parmed Medical Aid Scheme	2,220	2,078	6.8	5,433	5,276	3.0	134,761	112,538	19.7	2,066.9	1,777.5	16.3	65.7	64.2	2.3
1515	PG Bison Medical Aid Society	656	765	-14.2	1,412	1,704	-17.1	20,173	22,884	-11.8	1,190.6	1,119.0	6.4	136.2	109.7	24.2
1186	PG Group Medical Scheme	1,267	1,259	0.7	2,714	2,693	0.8	43,972	39,572	11.1	1,350.3	1,224.7	10.3	110.3	110.1	0.2
1563	Pick & Pay Medical Scheme	7,618	7,127	6.9	16,048	15,030	6.8	179,993	152,062	18.4	934.7	843.1	10.9	81.1	85.4	-5.0
1583	Platinum Health	31,479	30,554	3.0	54,800	51,929	5.5	324,783	281,385	15.4	493.9	451.6	9.4	32.0	47.4	-32.5
1194	Profmed	24,313	23,861	1.9	61,661	61,625	0.1	665,555	585,472	13.7	899.5	791.7	13.6	45.1	51.5	-12.4



## Annexure S: Gross contribution income and solvency: registered schemes for the years ended 31 December 2008-2009

Members			Beneficiaries			Gross Contribution Income (GCI)			Gross Contribution Income (GCI)			Solvency ratio				
Average 2009		Average 2008	% growth	Average 2009		Average 2008	% growth	2009 R'000	2008 R'000	% growth	2009 pabpm R	2008 pabpm R	% growth	2009 %	2008 %	% growth
Ref. no.	Name of medical scheme															
Registered schemes: restricted continued																
I516	Quantum Medical Aid Society	6,968	7,139	-2.4	14,576	14,951	-2.5	123,161	113,456	8.6	704.1	632.4	11.3	114.6	125.3	-8.5
I201	Rand Water Medical Scheme	2,883	2,816	2.4	7,174	6,948	3.2	89,389	80,844	10.6	1,038.4	969.6	7.1	95.9	106.0	-9.5
I430	Remedi Medical Aid Scheme	15,183	14,328	6.0	35,023	33,152	5.6	450,730	387,892	16.2	1,072.5	975.0	10.0	49.2	50.8	-3.1
I176	Retail Medical Scheme	6,668	5,531	20.5	12,644	10,897	16.0	112,329	97,935	14.7	740.3	748.9	-1.1	98.5	99.9	-1.4
I013	Rhodes University Medical Scheme	991	952	4.1	2,125	2,018	5.3	23,181	19,598	18.3	909.0	809.4	12.3	93.1	100.2	-7.1
I209	SA Breweries Medical Aid Society	9,307	8,835	5.3	21,352	20,467	4.3	226,778	197,717	14.7	885.1	805.0	10.0	87.5	90.1	-2.9
I424	SABC Medical Aid Scheme	4,644	4,429	4.8	10,062	9,659	4.2	151,779	134,173	13.1	1,257.1	1,157.6	8.6	50.8	57.3	-11.3
I038	SAMWUMed	29,983	27,129	10.5	72,991	68,429	6.7	487,426	356,444	36.7	556.5	434.1	28.2	59.8	58.4	2.4
I527	Sappi Medical Aid Scheme	4,125	4,128	-0.1	9,584	9,702	-1.2	139,360	124,522	11.9	1,211.8	1,069.5	13.3	42.8	45.7	-6.3
I234	Sasolmed	27,916	24,562	13.7	73,443	65,561	12.0	936,305	778,377	20.3	1,062.4	989.4	7.4	46.7	47.7	-2.1
I531	Sedmed	871	858	1.5	2,035	2,042	-0.4	17,918	16,410	9.2	733.8	669.7	9.6	69.2	65.5	5.6
I243	Siemens Medical Scheme	2,985	2,991	-0.2	6,748	6,782	-0.5	96,678	90,785	6.5	1,194.0	1,115.6	7.0	52.0	60.4	-13.9
I589	Solvita Medical Scheme	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
I580	South African Police Service Medical Scheme (POLMED)	166,903	159,375	4.7	471,285	456,137	3.3	4,282,465	3,765,839	13.7	757.2	688.0	10.1	29.2	35.7	-18.2
I254	Stocksmed	892	917	-2.8	1,910	1,984	-3.7	27,687	25,400	9.0	1,207.7	1,066.6	13.2	92.4	108.7	-15.0
I544	Tiger Brands Medical Scheme	5,014	5,061	-0.9	11,576	11,675	-0.9	155,517	137,212	13.3	1,119.6	979.4	14.3	51.6	57.5	-10.3
I582	Transmed Medical Fund	74,705	76,060	-1.8	146,985	152,147	-3.4	1,289,223	1,248,036	3.3	730.9	683.6	6.9	28.9	41.6	-30.5
I579	Tsogo Sun Group Medical Scheme	2,940	2,781	5.7	6,243	5,926	5.3	64,522	56,292	14.6	861.3	791.6	8.8	74.7	77.1	-3.1
I434	Umed	8,071	8,233	-2.0	18,843	19,644	-4.1	270,421	236,731	14.2	1,195.9	1,004.3	19.1	46.6	50.7	-8.1
I597	Umvuzo Health Medical Scheme	17,365	20,386	-14.8	32,209	35,180	-8.4	169,050	163,733	3.2	437.4	387.8	12.8	14.5	12.4	16.9
I520	University of Kwa-Zulu Natal Medical Scheme	3,258	3,432	-5.1	7,022	7,364	-4.6	81,216	77,076	5.4	963.8	872.2	10.5	77.1	81.0	-4.8
I282	University of the Witwatersrand Staff Medical Aid Scheme	2,973	2,897	2.6	6,270	6,244	0.4	95,734	82,852	15.5	1,272.4	1,105.8	15.1	58.1	67.7	-14.2

## Annexure S: Gross contribution income and solvency: registered schemes for the years ended 31 December 2008-2009

Members				Beneficiaries			Gross Contribution Income (GCI)			Gross Contribution Income (GCI)			Solvency ratio				
Average		Average	%	Average	Average	%	2009	2008	%	2009	2008	%	2009	2008	%		
2009		2008	growth	2009	2008	growth	R'000	R'000	growth	pabpm	pabpm	growth	%	%	growth		
Ref. no.	Name of medical scheme									R	R						
Registered schemes:																	
restricted continued																	
1291	Witbank Coalfields Medical Aid Scheme	10,308	9,152	12.6	25,817	23,208	11.2	264,630	225,647	17.3	854.2	810.2	5.4	106.7	109.4	-2.5	
1293	Wooltru Healthcare Fund	8,829	8,745	1.0	18,153	18,170	-0.1	166,285	149,492	11.2	763.4	685.6	11.3	85.8	93.8	-8.5	
1253	Xstrata Medical Aid Scheme	7,668	7,250	5.8	22,356	20,607	8.5	150,061	129,876	15.5	559.4	525.2	6.5	35.9	47.3	-24.1	
Sub-total: registered restricted schemes			1,297,145	1,199,010	8.2	3,115,571	2,843,488	9.6	30,509,043	25,102,103	21.5	816.0	735.7	10.9	42.5	49.7	-14.5
Total registered schemes			3,434,445	3,306,811	3.9	7,946,207	7,709,697	3.1	84,863,217	74,105,560	14.5	890.0	801.0	11.1	32.9	36.6	-10.1

### Notes

Prior year figures have been restated.

GCI = Gross Contribution Income

pab = per average beneficiary

The scheme liquidated in 2008. No figures were submitted at the time of finalising the Annual Report.

Cawmed Medical Scheme was liquidated with effect from 1 September 2008.

The members of Humanity Medical Scheme were transferred to Community Medical Aid Scheme (COMMED) on 1 September 2008.

Renaissance Health Medical Scheme was liquidated with effect from 17 October 2008. Members were transferred to Medihelp on 1 October 2008.

The schemes liquidated in 2008 and 2009. Figures were submitted.

Biz Health Medical Scheme was liquidated with effect from 30 April 2008.

Mascom Medical Scheme was liquidated with effect from 31 December 2008.

Purehealth Medical Scheme was liquidated with effect from 31 December 2009.

Stocksmed was liquidated with effect from 31 December 2009.

The scheme was deregistered in 2008.

Pathfinder Medical Scheme was deregistered with effect from 31 December 2008. The majority of members moved to Discovery Health Medical Scheme.

The following schemes amalgamated in 2008 and 2009:

Global Health amalgamated with Munimed with effect from 1 January 2008.

Cimas Wellness Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.

Lifemed Medical Scheme amalgamated with Compcare Medical Scheme with effect from 1 January 2008.

Meridian Health amalgamated with Momentum Health with effect from 1 January 2008.

BHP Billiton SA Medical Scheme amalgamated with Bonitas Medical Fund with effect from 1 July 2008.

Openplan Medical Scheme amalgamated with Medihelp with effect from 1 January 2009

The scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: open																			
1252	Bestmed Medical Scheme	Blue Print Health Plan	6,757	12,397	27.5	2.8	20,307	26.0	250.4	18,468	23.6	227.8	-	-	-	(1,840)	-2.4	-22.7	-9.1
		Bonus Plus	13,288	35,928	30.9	3.5	1,410	0.4	8.8	1,505	0.4	9.4	-	-	-	95	-	0.6	6.7
		Millennium Basic	5,083	9,490	27.9	2.3	487	0.8	8.0	519	0.9	8.5	-	-	-	33	0.1	0.5	6.7
		Millennium	4,564	9,451	45.8	22.7	485	0.3	8.9	517	0.3	9.4	-	-	-	33	-	0.6	6.7
		Comprehensive																	
		Millennium Standard	4,918	9,708	36.2	11.4	519	0.5	8.8	555	0.6	9.4	-	-	-	35	-	0.6	6.7
		Topcare	5,678	12,816	41.0	16.4	585	0.2	8.6	625	0.3	9.2	-	-	-	39	-	0.6	6.7
		Vital Care	513	851	29.9	3.3	32	1.0	5.3	35	1.1	5.6	-	-	-	2	0.1	0.4	6.8
		Consolidated	40,801	90,641	33.7	7.9	23,825	2.3	48.7	22,223	2.1	45.4	-	-	-	(1,602)	-0.2	-3.3	-6.7
1512	Bonitas Medical Fund	Boncap	24,714	32,215	34.7	3.9	123,942	99.0	417.9	143,763	114.9	484.8	-	-	-	19,821	15.8	66.8	16.0
		BonComprehensive	3,921	8,902	38.1	12.9	12,543	7.8	266.6	9,929	6.1	211.0	-	-	-	(2,614)	-1.6	-55.6	-20.8
		Bonsave	18,466	43,573	27.3	2.3	24,267	8.1	109.5	19,871	6.6	89.7	-	-	-	(4,396)	-1.5	-19.8	-18.1
		Primary	54,791	138,603	26.7	1.7	84,302	9.4	128.2	68,496	7.6	104.2	-	-	-	(15,806)	-1.8	-24.0	-18.7
		Standard	177,654	427,553	31.7	5.1	487,261	10.3	228.6	403,035	8.6	189.1	-	-	-	(84,226)	-1.8	-39.5	-17.3
		Consolidated	279,546	650,846	30.6	4.2	732,315	11.8	218.3	645,094	10.4	192.3	-	-	-	(87,221)	-1.4	-26.0	-11.9
1034	Cape Medical Plan	Healthpact Gold	464	866	53.4	39.4	499	2.3	89.5	167	0.8	30.0	-	-	-	(331)	-1.6	-59.5	-66.5
		Healthpact Premium	2,415	5,271	34.0	9.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Healthpact Silver	3,921	9,106	32.4	7.1	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	6,800	15,243	34.1	9.7	499	0.4	6.1	167	0.1	2.0	-	-	-	(331)	-0.3	-4.1	-66.5
1552	Community Medical Aid Scheme (COMMED)	Core	551	1,059	35.0	8.3	1,947	35.6	294.5	545	10.0	82.5	-	-	-	(1,402)	-25.6	-212.0	-72.0
		Deluxe	4,222	8,901	42.2	17.8	3,069	2.0	60.6	4,180	2.7	82.5	-	-	-	1,110	0.7	21.9	36.2
		Standard	8,096	20,306	32.5	5.8	5,776	2.7	59.5	8,015	3.7	82.5	-	-	-	2,239	1.0	23.0	38.8
		Consolidated	12,869	30,266	35.5	9.4	10,793	2.9	69.9	12,740	3.4	82.5	-	-	-	1,948	0.5	12.6	18.0
1491	Compicare Wellness Medical Scheme	Accolade	1,182	2,546	48.2	21.1	1,510	2.3	106.5	1,228	1.9	86.5	-	-	-	(282)	-0.4	-19.9	-18.7
		Axis	835	1,670	42.6	14.0	674	4.6	67.3	540	3.7	53.9	-	-	-	(135)	-0.9	-13.4	-20.0
		Dynamix	2,307	5,031	42.4	18.0	2,218	2.5	80.1	1,794	2.0	64.8	-	-	-	(425)	-0.5	-15.3	-19.1
		Pinnacle	762	1,776	41.2	11.0	701	1.6	76.7	571	1.3	62.4	-	-	-	(131)	-0.3	-14.3	-18.6
		Mumed	3,460	8,436	29.6	4.6	1,624	2.1	39.1	1,358	1.8	32.7	-	-	-	(266)	-0.3	-6.4	-16.4
		Networx	62	98	34.4	11.2	407	43.7	547.5	252	27.0	338.2	-	-	-	(156)	-16.7	-209.3	-38.2
		Symmetry	4,745	11,030	36.9	11.3	3,580	2.4	62.9	2,930	2.0	51.5	-	-	-	(650)	-0.4	-11.4	-18.1
		Consolidated	13,353	30,587	37.3	11.5	10,716	2.4	66.9	8,672	2.0	54.1	-	-	-	(2,044)	-0.5	-12.8	-19.1



# Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
<b>Registered schemes:</b>																			
<b>open continued</b>																			
I125	Discovery Health Medical Scheme	Classic Comprehensive	179,405	437,767	35.1	8.7	61,400	0.7	28.5	59,055	0.7	27.4	-	-	-	(2,344)	-	-1.1	-3.8
		Classic Core	47,743	102,903	34.7	8.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Classic Priority	82,754	190,765	31.7	5.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Classic Saver	141,216	307,353	29.4	3.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Coastal Core	65,499	145,034	33.7	7.1	-	-	-	-	-	-	-	-	-	-	-	-	-
		Coastal Saver	128,574	302,014	30.0	3.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Essential Comprehensive	35,906	80,419	36.7	12.1	7,979	0.6	18.5	7,462	0.6	17.3	-	-	-	(517)	-	-1.2	-6.5
		Essential Core	17,974	39,523	33.0	7.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Essential Priority	10,135	21,899	31.0	6.5	-	-	-	-	-	-	-	-	-	-	-	-	-
		Essential Saver	57,639	131,032	28.5	4.1	-	-	-	-	-	-	-	-	-	-	-	-	-
		Executive	10,262	24,559	36.9	10.1	4,481	0.8	36.4	4,409	0.8	35.8	-	-	-	(72)	-	-0.6	-1.6
		Foundation Core	1,200	2,667	37.3	12.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		KeyCare Core	17,082	28,184	31.4	5.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		KeyCare Plus	122,191	227,789	26.3	2.7	21,162	1.8	14.4	23,735	2.1	16.2	-	-	-	2,573	0.2	1.8	12.2
		Consolidated	917,580	2,041,908	31.6	5.9	95,022	0.4	8.6	94,661	0.4	8.6	-	-	-	(361)	-	-	-0.4
I202	Fedhealth Medical Scheme	Blue Door	1,637	2,144	23.0	0.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Maxima Basis	13,705	29,996	31.4	3.6	-	-	-	-	-	-	-	-	-	-	-	-	-
		Maxima Core	12,300	25,401	36.9	9.4	-	-	-	-	-	-	-	-	-	-	-	-	-
		Maxima Plus	1,415	2,654	44.7	15.1	1,612	2.3	94.9	2,359	3.4	138.9	-	-	-	747	1.1	44.0	46.4
		Maxima Standard	42,876	97,925	32.4	3.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		Ultima 200 without OHEB	5,737	12,314	47.5	22.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Ultima 200 with OHEB	4,542	8,901	49.0	27.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Ultima 300	3,140	5,832	53.7	33.9	2,858	1.8	75.9	4,326	2.8	114.8	-	-	-	1,468	0.9	38.9	51.3
		Ultimax	768	1,279	57.8	41.3	877	1.7	95.2	1,239	2.4	134.4	-	-	-	362	0.7	39.2	41.2
		Consolidated	86,120	186,446	35.5	8.1	5,347	0.2	5.2	7,924	0.4	7.7	-	-	-	2,577	0.1	2.5	48.2
I554	Genesis Medical Scheme	Private	3,931	11,632	31.2	5.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Private Comprehensive	1,300	3,740	29.7	3.4	-	-	-	-	-	-	-	-	-	-	-	-	-
		Private Plus	1,963	5,518	29.7	3.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	7,194	20,890	30.5	4.8	-	-	-	-	-	-	-	-	-	-	-	-	-

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

Ref. no.	Name of medical scheme	Name of benefit option	Members	Beneficiaries	Average age	Pensioner ratio	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income /
			As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As %	pmpm	R'000	As %	pmpm	R'000	As %	pmpm	R'000	As %	pmpm	(expense) as % of
								of GCI	R		of GCI	R		of GCI	R		of GCI	R	capitation fees
<b>Registered schemes:</b>																			
<b>open continued</b>																			
1561	Gen-Health Medical Scheme	Basic Cover Plan	9,171	21,960	35.1	6.4	-	-	-	-	-	-	-	-	-	-	-	-	-
		Cover Plus Plan	3,026	7,939	38.7	10.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Primary Cover Plan	380	561	36.4	12.8	1,754	84.8	384.6	1,762	85.2	386.5	-	-	-	9	0.4	1.9	0.5
		Consolidated	12,577	30,460	36.1	7.5	1,754	0.7	11.6	1,762	0.7	11.7	-	-	-	9	-	0.1	0.5
1466	Good Hope Medical Aid Society	Makoti Comprehensive	1,203	2,820	28.6	0.2	17,502	92.7	1,212.4	18,448	97.7	1,277.9	-	-	-	946	5.0	65.5	5.4
		Makoti Primary	1,879	4,942	29.2	0.4	12,368	88.3	548.5	21,045	150.2	933.3	-	-	-	8,677	61.9	384.8	70.2
		Super 100	355	857	38.7	9.3	652	9.2	152.9	469	6.6	110.1	-	-	-	(183)	-2.6	-42.9	-28.0
		Consolidated	3,437	8,619	30.0	1.2	30,522	76.4	740.0	39,962	100.0	968.9	-	-	-	9,441	23.6	228.9	30.9
1537	Hosmed Medical Aid Scheme	Plus	9,718	30,514	29.7	2.2	9,034	2.5	77.5	17,930	5.0	153.8	-	-	-	8,896	2.5	76.3	98.5
		Step	6,853	12,539	29.9	1.8	32,926	86.2	400.4	36,155	94.7	439.6	-	-	-	3,229	8.5	39.3	9.8
		Value	15,840	48,845	28.7	1.8	14,549	3.3	76.5	23,038	5.2	121.2	-	-	-	8,489	1.9	44.7	58.3
		Consolidated	32,411	91,898	29.2	2.0	56,509	6.8	145.3	77,123	9.2	198.3	-	-	-	20,614	2.5	53.0	36.5
1577	Ingwe Health Plan	Capitation	6,469	10,361	28.6	1.6	25,697	27.1	331.0	27,675	29.2	356.5	-	-	-	1,978	2.1	25.5	7.7
		Pioneer	5,163	5,274	24.6	-	6,930	33.4	111.9	7,188	34.6	116.0	-	-	-	258	1.2	4.2	3.7
		Classic	167	348	39.9	8.9	18	0.2	9.0	12	0.1	6.0	-	-	-	(6)	-0.1	-3.0	-33.3
		Hospital Plus	760	977	29.3	3.0	1,196	18.3	131.1	1,585	24.3	173.8	-	-	-	389	6.0	42.7	32.5
		Medicare	1,117	2,238	35.2	8.5	5,587	25.0	416.8	6,103	27.3	455.3	(1,112)	-5.0	-83.0	(596)	-2.7	-44.5	-10.7
		Consolidated	13,676	19,198	28.5	2.1	39,428	25.5	240.3	42,563	27.5	259.4	(1,112)	-0.7	-6.8	2,023	1.3	12.3	5.1
1087	Keyhealth	Bronze	1,585	3,811	34.5	9.0	2,642	12.3	138.9	2,569	11.9	135.1	(507)	-2.4	-26.7	(580)	-2.7	-30.5	-22.0
		Gold	26,826	64,023	39.3	13.7	50,811	5.5	157.8	50,062	5.4	155.5	4,462	0.5	13.9	3,713	0.4	11.5	7.3
		Keycap	1,012	1,871	46.2	22.2	12,326	80.0	1,015.0	12,410	80.5	1,021.9	-	-	-	84	0.5	6.9	0.7
		Platinum	7,272	13,802	50.8	29.1	13,432	3.8	153.9	13,219	3.7	151.5	1,210	0.3	13.9	997	0.3	11.4	7.4
		Silver	7,706	19,028	35.4	9.9	14,931	7.5	161.5	14,685	7.4	158.8	1,282	0.6	13.9	1,036	0.5	11.2	6.9
		Consolidated	44,401	102,535	40.1	15.0	94,142	6.2	176.7	92,945	6.1	174.4	6,447	0.4	12.1	5,250	0.3	9.9	5.6
1576	Liberty Health Medical Scheme	Gold Complete	2,385	5,578	37.0	11.7	430	0.5	15.0	365	0.4	12.8	-	-	-	(65)	-0.1	-2.3	-15.2
		Gold Focus	8,589	18,255	37.0	10.1	803	0.5	7.8	681	0.5	6.6	-	-	-	(122)	-0.1	-1.2	-15.2
		Gold Plus	6,217	13,790	32.1	6.5	597	0.5	8.0	506	0.4	6.8	-	-	-	(91)	-0.1	-1.2	-15.2
		Platinum Complete	7,971	18,552	40.5	15.5	1,631	0.5	17.1	1,384	0.4	14.5	-	-	-	(248)	-0.1	-2.6	-15.2
		Platinum Focus	9,205	20,042	40.8	14.7	1,142	0.5	10.3	969	0.5	8.8	-	-	-	(173)	-0.1	-1.6	-15.2
		Platinum Plus	1,866	3,963	33.9	6.8	223	0.5	9.9	189	0.4	8.4	-	-	-	(34)	-0.1	-1.5	-15.2

# Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes:																			
open continued																			
1576	Liberty Health	Silver Corporate	6,631	11,166	30.3	2.8	39,339	86.9	494.4	51,426	113.6	646.3	-	-	-	12,087	26.7	151.9	30.7
	Medical Scheme continued	Network																	
		Silver Focus	2,121	3,827	35.9	12.7	136	0.5	5.3	115	0.4	4.5	-	-	-	(21)	-0.1	-0.8	-15.2
		Consolidated	44,985	95,173	36.8	10.8	44,301	4.1	82.1	55,635	5.2	103.1	-	-	-	11,334	1.1	21.0	25.6
1549	Medicover	Alta	4,228	9,309	38.4	15.4	676	0.5	13.3	428	0.3	8.4	-	-	-	(248)	-0.2	-4.9	-36.7
		Bona Plus	10,231	25,553	28.9	4.5	48,015	22.1	391.1	44,317	20.4	361.0	-	-	-	(3,698)	-1.7	-30.1	-7.7
		Titan	23,309	57,123	29.3	3.0	3,933	0.6	14.1	3,685	0.6	13.2	-	-	-	(248)	-	-0.9	-6.3
		Consolidated	37,768	91,985	30.1	4.6	52,624	5.3	116.1	48,430	4.9	106.9	-	-	-	(4,194)	-0.4	-9.3	-8.0
1149	Medihelp	Dimension Elite	28,928	55,925	45.9	21.9	75,902	8.8	218.7	78,657	9.1	226.6	-	-	-	2,755	0.3	7.9	3.6
		Dimension Prime 1	8,582	19,755	34.3	8.5	1,091	1.0	10.6	334	0.3	3.2	-	-	-	(757)	-0.7	-7.4	-69.4
		Dimension Prime 2	10,691	24,900	34.8	11.1	5,135	2.5	40.0	3,809	1.9	29.7	-	-	-	(1,327)	-0.7	-10.3	-25.8
		Dimension Prime 3	18,538	46,043	32.6	6.8	44,122	10.5	198.3	45,992	11.0	206.7	-	-	-	1,870	0.4	8.4	4.2
		Medihelp Plus	31,432	42,060	68.7	68.7	60,214	4.1	159.6	59,003	4.0	156.4	-	-	-	(1,211)	-0.1	-3.2	-2.0
		Necesse	11,360	20,940	29.8	3.5	28,561	31.0	209.5	19,107	20.8	140.2	-	-	-	(9,454)	-10.3	-69.3	-33.1
		Unify	3,147	10,617	25.4	1.9	48,573	61.0	1,286.2	46,456	58.3	1,230.2	-	-	-	(2,117)	-2.7	-56.1	-4.4
		Consolidated	112,678	220,240	42.7	22.5	263,599	8.2	194.9	253,358	7.9	187.4	-	-	-	(10,241)	-0.3	-7.6	-3.9
1506	Medimed Medical	Alpha	1,364	3,608	28.5	3.2	228	1.1	13.9	451	2.2	27.6	-	-	-	223	1.1	13.6	97.7
	Scheme	Managed Care	983	2,705	26.9	2.3	13,643	65.8	1,156.6	10,391	50.1	880.9	-	-	-	(3,252)	-15.7	-275.7	-23.8
		Medisave - Max	315	788	38.0	9.7	52	0.4	13.7	103	0.9	27.2	-	-	-	51	0.4	13.5	98.1
		Medisave - Standard	1,574	4,010	28.4	3.1	273	0.7	14.4	536	1.4	28.4	-	-	-	263	0.7	13.9	96.3
		Consolidated	4,236	11,111	28.7	3.4	14,196	15.5	279.3	11,481	12.5	225.9	-	-	-	(2,715)	-3.0	-53.4	-19.1
1140	Medshield Medical	HospilPlan	1,439	2,795	43.8	19.0	-	-	-	-	-	-	-	-	-	-	-	-	-
	Scheme	MediBonus	11,312	23,793	35.9	6.6	6,236	1.8	45.9	-	-	-	-	-	-	(6,236)	-1.8	-45.9	-100.0
		MediPlus	43,263	110,256	29.6	2.3	11,236	1.2	21.6	-	-	-	-	-	-	(11,236)	-1.2	-21.6	-100.0
		MediValue	17,017	36,794	30.5	3.3	2,483	1.1	12.2	15,155	6.9	74.2	-	-	-	12,672	5.7	62.1	510.3
		Consolidated	73,031	173,638	30.9	3.4	19,954	1.3	22.8	15,155	1.0	17.3	-	-	-	(4,800)	-0.3	-5.5	-24.1
1167	Momentum Health	Access	2,514	4,834	28.4	4.0	11,919	32.1	395.1	7,349	19.8	243.6	-	-	-	(4,570)	-12.3	-151.5	-38.3
		Base Carecross & Hospital Network	34	46	22.7	-	10	34.5	24.5	12	41.4	29.4	-	-	-	2	6.9	4.9	20.0
		Base Carecross & State Hospital	55	55	41.4	-	20	45.5	30.3	25	56.8	37.9	-	-	-	5	11.4	7.6	25.0



## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes:																			
open continued																			
1167	Momentum Health continued	Base Faranani & Hospital Network	246	493	25.8	0.8	842	28.4	285.2	690	23.3	233.7	-	-	-	(152)	-5.1	-51.5	-18.1
		Base Faranani & State Hospital	87	134	27.3	0.8	266	46.5	254.8	218	38.1	208.8	-	-	-	(48)	-8.4	-46.0	-18.0
		Base Primecure & Hospital Network	1,676	3,094	30.0	5.1	5,264	25.7	261.7	3,796	18.5	188.7	-	-	-	(1,468)	-7.2	-73.0	-27.9
		Base Primecure & State Hospital	2,321	2,537	32.6	0.3	4,092	39.8	146.9	3,167	30.8	113.7	-	-	-	(925)	-9.0	-33.2	-22.6
		Custom Any GP/Phar- macy & Any Hospital	2,297	5,108	34.0	9.5	1,776	4.2	64.4	1,702	4.0	61.7	-	-	-	(74)	-0.2	-2.7	-4.2
		Custom Any GP/ Pharmacy & Associated Hospital	9,595	22,784	29.0	2.3	7,978	4.9	69.3	7,645	4.6	66.4	-	-	-	(333)	-0.2	-2.9	-4.2
		Custom Associated GP/ Pharmacy & Any Hospital	162	374	30.5	2.7	109	4.1	56.1	105	4.0	54.0	-	-	-	(4)	-0.2	-2.1	-3.7
		Custom Associated GP/ Pharmacy & Associated Hospital	971	2,217	31.3	5.2	568	5.0	48.7	544	4.8	46.7	-	-	-	(24)	-0.2	-2.1	-4.2
		Custom State & Any Hospital	2,586	5,924	27.8	2.6	2,105	4.5	67.8	2,017	4.3	65.0	-	-	-	(88)	-0.2	-2.8	-4.2
		Custom State & Associated Hospital	9,127	20,197	27.9	2.2	7,025	5.7	64.1	6,731	5.5	61.5	-	-	-	(294)	-0.2	-2.7	-4.2
		Extender Any GP /Phar- macy & Any Hospital	5,927	13,230	42.3	16.8	15,614	6.1	219.5	14,998	5.8	210.9	-	-	-	(616)	-0.2	-8.7	-3.9
		Extender Any GP / Pharmacy & Any Associated Hospital	165	429	35.1	9.6	4,347	6.9	2,195.5	4,175	6.6	2,108.6	-	-	-	(172)	-0.3	-86.9	-4.0
Extender Associated GP / Pharmacy & Any Hospital	1,608	3,561	40.1	12.9	344	6.0	17.8	331	5.8	17.2	-	-	-	(13)	-0.2	-0.7	-3.8		

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: open continued																			
1167	Momentum Health continued	Extender Associated GP / Pharmacy & Associated Hospital	279	682	37.2	12.9	698	6.9	208.5	670	6.6	200.1	-	-	-	(28)	-0.3	-8.4	-4.0
		Extender State & Any Hospital	3,150	7,780	29.4	3.4	8,387	6.6	221.9	8,056	6.4	213.1	-	-	-	(331)	-0.3	-8.8	-3.9
		Extender State & Associated Hospital	1,223	3,207	29.3	2.5	3,351	7.2	228.3	3,218	6.9	219.3	-	-	-	(133)	-0.3	-9.1	-4.0
		Incentive Any GP/Phar- macy & Any Hospital	12,248	26,644	40.7	16.3	17,703	6.1	120.4	16,989	5.9	115.6	-	-	-	(714)	-0.2	-4.9	-4.0
		Incentive Any GP/ Pharmacy & Associated Hospital	2,518	5,958	35.5	9.2	3,706	6.2	122.7	3,557	6.0	117.7	-	-	-	(149)	-0.2	-4.9	-4.0
		Incentive Associated GP / Pharmacy & Any Hospital	338	779	34.8	8.3	429	6.0	105.8	412	5.7	101.6	-	-	-	(17)	-0.2	-4.2	-4.0
		Incentive Associated GP / Pharmacy & Associated Hospital	794	1,819	34.4	7.2	978	6.7	102.6	938	6.4	98.4	-	-	-	(40)	-0.3	-4.2	-4.1
		Incentive State & Any Hospital	10,641	24,626	30.2	4.5	16,037	6.4	125.6	15,391	6.1	120.5	-	-	-	(646)	-0.3	-5.1	-4.0
		Incentive State & Associated Hospital	8,923	19,709	30.4	4.2	13,191	7.5	123.2	12,660	7.2	118.2	-	-	-	(531)	-0.3	-5.0	-4.0
		Summit	2,160	4,131	52.0	32.8	17,118	13.7	660.4	16,452	13.1	634.7	-	-	-	(666)	-0.5	-25.7	-3.9
Consolidated	81,645	180,352	33.2	7.6	143,877	7.6	146.9	131,848	7.0	134.6	-	-	-	(12,029)	-0.6	-12.3	-8.4		
1166	National Independent Medical Aid Society (NIMAS)	Classic	7,265	16,227	34.0	7.3	5,610	3.6	64.4	6,260	4.1	71.8	-	-	-	650	0.4	7.5	11.6
		Millenium	4,688	10,181	44.1	20.3	3,663	2.6	65.1	5,385	3.8	95.7	-	-	-	1,723	1.2	30.6	47.0
		Supreme	561	1,171	47.6	28.4	442	1.4	65.7	701	2.2	104.1	-	-	-	259	0.8	38.4	58.6
		Primary	1,327	2,161	34.0	11.9	11,022	73.5	692.2	19,811	132.1	1,244.1	-	-	-	8,789	58.6	552.0	79.7
		Consolidated	13,841	29,740	38.0	12.9	20,737	6.0	124.9	32,158	9.4	193.6	-	-	-	11,421	3.3	68.8	55.1
1215	Oxygen Medical Scheme	80% Plan	9,086	19,579	43.2	22.3	4,693	3.5	43.0	2,408	1.8	22.1	277	0.2	2.5	(2,008)	-1.5	-18.4	-42.8
		Core Plus	16,981	43,376	36.4	12.6	1,816	0.5	8.9	-	-	-	-	-	-	(1,816)	-0.5	-8.9	-100.0



## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees		
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%		
Registered schemes: open continued																					
1215	Oxygen Medical Scheme continued	Elite Plus	-	-	-	-	1,787	1.7	-	2,194	2.1	-	262	0.3	-	669	0.6	-	37.4		
		Essential	2,733	4,475	40.2	20.0	2,296	5.9	70.0	1,069	2.7	32.6	119	0.3	3.6	(1,108)	-2.8	-33.8	-48.3		
		Essential Carecross	3,794	6,475	38.8	18.5	13,397	24.1	294.3	15,571	28.0	342.0	-	-	-	2,174	3.9	47.7	16.2		
		Premium Plus	6,759	14,744	38.3	15.8	572	0.6	7.1	342	0.4	4.2	46	0.1	0.6	(185)	-0.2	-2.3	-32.2		
		Progressive	1,990	3,425	43.7	24.9	9,890	23.5	414.1	9,806	23.3	410.6	-	-	-	(84)	-0.2	-3.5	-0.8		
		Standard	17,134	41,786	33.8	9.9	18,574	4.5	90.3	12,235	3.0	59.5	1,354	0.3	6.6	(4,986)	-1.2	-24.2	-26.8		
		Standard Plus	-	-	-	-	8,418	3.1	-	8,524	3.2	-	1,016	0.4	-	1,122	0.4	-	13.3		
		Other*	-	-	-	-	108	14.5	-	-	-	-	-	-	-	(108)	-14.5	-	-100.0		
Consolidated	58,477	133,860	37.2	14.4	61,552	4.0	87.7	52,149	3.4	74.3	3,074	0.2	4.4	(6,329)	-0.4	-9.0	-10.3				
1546	Pharos Medical Plan	Footprint Comprehensive	749	1,639	28.1	3.6	57	0.4	6.4	56	0.4	6.2	-	-	-	(1)	-	-0.1	-1.8		
		Footprint Primary	557	995	32.7	7.2	42	0.8	6.3	42	0.8	6.2	-	-	-	(1)	-	-0.1	-1.7		
		Methcare	1,120	2,655	40.1	18.6	81	0.5	6.0	80	0.5	5.9	-	-	-	(1)	-	-0.1	-1.7		
		Paladin Comprehensive	1,736	4,312	32.2	5.9	127	0.2	6.1	125	0.2	6.0	-	-	-	(2)	-	-0.1	-1.7		
		Rainbow Comprehensive	1,557	3,590	39.4	11.9	115	0.1	6.1	113	0.1	6.0	-	-	-	(2)	-	-0.1	-1.7		
		Rainbow Plus	1,035	2,515	29.2	4.1	72	0.3	5.8	70	0.3	5.7	-	-	-	(1)	-	-0.1	-1.8		
		Rainbow Primary	418	953	38.7	12.6	29	0.4	5.7	28	0.4	5.6	-	-	-	(0)	-	-0.1	-1.6		
		Consolidated	7,172	16,659	34.5	9.2	523	0.2	6.1	514	0.2	6.0	-	-	-	(9)	-	-0.1	-1.7		
		1454	Pro Sano Medical Scheme	ProCedure	4,059	6,288	33.0	4.5	-	-	-	-	-	-	-	-	-	-	-	-	-
				ProClassic	23,274	53,570	39.2	13.4	4,057	0.6	14.5	3,124	0.5	11.2	-	-	-	(933)	-0.1	-3.3	-23.0
ProElite	483			1,146	32.8	5.4	59	0.3	10.1	45	0.3	7.8	-	-	-	(13)	-0.1	-2.3	-23.0		
ProVider	3,518			8,536	33.9	8.6	400	0.7	9.5	308	0.5	7.3	-	-	-	(92)	-0.2	-2.2	-23.0		
ProVision	249			523	34.6	8.0	29	0.8	9.7	22	0.6	7.5	-	-	-	(7)	-0.2	-2.2	-23.0		
Consolidated	31,583			70,063	37.8	11.9	4,545	0.6	12.0	3,499	0.4	9.2	-	-	-	(1,045)	-0.1	-2.8	-23.0		
1196	Protea Medical Aid Society	Extended Plan	190	279	71.0	69.5	150	1.4	65.9	105	1.0	45.8	-	-	-	(46)	-0.4	-20.0	-30.4		
		Standard Plan	765	1,271	58.0	46.5	377	1.7	41.1	257	1.2	28.0	-	-	-	(120)	-0.5	-13.1	-31.8		
		Essential Plan	5,242	5,596	24.3	0.3	6,261	39.4	99.5	6,052	38.1	96.2	-	-	-	(208)	-1.3	-3.3	-3.3		
		Consolidated	6,197	7,146	32.1	11.2	6,788	14.1	91.3	6,414	13.3	86.2	-	-	-	(374)	-0.8	-5.0	-5.5		
1170	Purehealth Medical Scheme	NBC Famplus	1,084	2,403	43.6	20.9	2,026	3.9	155.8	2,450	4.7	188.4	-	-	-	424	0.8	32.6	20.9		
		Network	731	1,270	43.3	26.1	14,258	118.6	1,625.4	14,620	121.6	1,666.6	-	-	-	362	3.0	41.3	2.5		

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

Members				Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees	
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%	
Registered schemes: open continued																				
1170	Purehealth Medical Scheme continued	NBC Savemed	896	1,880	42.0	20.2	833	2.5	77.5	855	2.5	79.5	-	-	-	22	0.1	2.0	2.6	
		NBC Topcare	507	1,078	48.9	26.4	1,007	2.7	165.5	1,947	5.3	319.9	-	-	-	940	2.6	154.4	93.3	
		Consolidated	3,218	6,631	44.0	22.6	18,124	13.5	469.4	19,872	14.8	514.6	-	-	-	1,747	1.3	45.2	9.6	
1575	Resolution Health Medical Scheme	Fundamental	4,829	9,549	28.0	1.1	18,054	39.8	311.6	20,947	46.2	361.5	-	-	-	2,893	6.4	49.9	16.0	
		Hospital	6,633	15,561	30.5	2.9	1,662	2.0	20.9	522	0.6	6.6	-	-	-	(1,140)	-1.4	-14.3	-68.6	
		Prestige	7,967	17,102	32.7	4.0	23,304	9.9	243.8	21,232	9.0	222.1	-	-	-	(2,071)	-0.9	-21.7	-8.9	
		Progressive	13,682	32,000	28.9	1.4	26,741	10.5	162.9	20,209	7.9	123.1	-	-	-	(6,533)	-2.6	-39.8	-24.4	
		Consolidated	33,111	74,212	30.0	2.3	69,761	11.3	175.6	62,910	10.2	158.3	-	-	-	(6,851)	-1.1	-17.2	-9.8	
1446	Selfmed Medical Scheme	Medoxi	5,114	11,325	42.3	17.7	700	0.7	11.4	316	0.3	5.1	-	-	-	(384)	-0.4	-6.3	-54.9	
		Medoxi Chronic	449	708	59.3	49.2	62	0.4	11.5	67	0.4	12.5	-	-	-	5	-	0.9	8.2	
		Medoxi Comprehensive	1,074	2,276	48.1	27.2	145	0.5	11.3	134	0.5	10.4	-	-	-	(12)	-	-0.9	-7.9	
		Selfmed 80%	942	1,602	57.0	44.4	129	0.2	11.4	178	0.3	15.7	-	-	-	49	0.1	4.3	37.6	
		Selfsure	3,674	7,728	33.7	9.5	506	0.6	11.5	278	0.3	6.3	-	-	-	(228)	-0.3	-5.2	-45.1	
		Consolidated	11,253	23,639	41.5	18.7	1,543	0.5	11.4	972	0.3	7.2	-	-	-	(570)	-0.2	-4.2	-37.0	
1486	Sizwe Medical Fund	Sizwe Affordable	20,962	52,254	30.5	4.6	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Sizwe Affordable Network	3,671	7,241	28.4	3.4	25,926	76.2	588.5	30,538	89.7	693.2	-	-	-	4,612	13.5	104.7	17.8	
		Sizwe Full Benefit	12,263	28,866	39.5	15.0	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Sizwe Primary	25,138	68,061	28.2	2.3	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Other*	-	-	-	-	11,258	94.8	-	6,971	58.7	-	-	-	-	-	(4,287)	-36.1	-	-38.1
		Consolidated	62,034	156,422	31.1	5.5	37,184	2.4	50.0	37,509	2.4	50.4	-	-	-	325	-	0.4	0.9	
		Alliance	12,149	21,520	31.6	6.0	-	-	-	-	-	-	-	-	-	-	-	-	-	
1141	Spectramed	Choice	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Elite	32,470	76,831	32.6	5.0	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Hospital	3,266	6,779	36.9	10.0	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Plus	1,146	2,083	53.4	33.5	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Consolidated	49,031	107,213	33.1	6.1	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Challenger	634	1,493	35.6	10.7	77	0.3	10.2	44	0.2	5.8	-	-	-	(33)	-0.1	-4.4	-43.0	
1464	Suremed Health	Explorer	91	165	27.0	1.2	223	33.8	204.2	179	27.1	163.9	-	-	-	(44)	-6.7	-40.3	-19.7	
		Navigator	714	1,776	31.5	2.3	80	0.5	9.3	46	0.3	5.3	-	-	-	(34)	-0.2	-4.0	-43.0	
		Shuttle	112	252	28.7	1.6	11	0.9	8.2	6	0.5	4.7	-	-	-	(5)	-0.4	-3.5	-43.2	



## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: open continued																			
1464	Suremed Health continued	Consolidated	1,551	3,686	32.8	5.6	391	1.0	21.0	275	0.7	14.8	-	-	-	(116)	-0.3	-6.2	-29.7
1147	Telemed	Bronze	3,076	5,052	31.7	8.8	29,459	104.5	798.1	40,156	142.5	1,087.9	751	2.7	20.3	11,448	40.6	310.1	38.9
		Gold	8,766	20,112	39.1	14.0	1,738	0.5	16.5	1,871	0.5	17.8	-	-	-	133	-	1.3	7.6
		Gold Select	2,147	3,478	62.0	57.7	90,645	110.5	3,518.3	39,614	48.3	1,537.6	53,731	65.5	2,085.5	2,700	3.3	104.8	3.0
		Platinum	7,506	15,783	43.3	16.5	1,499	0.4	16.6	1,613	0.4	17.9	-	-	-	114	-	1.3	7.6
		Silver	3,349	8,022	27.6	2.5	702	0.8	17.5	756	0.8	18.8	-	-	-	54	0.1	1.3	7.6
		Consolidated	24,844	52,447	39.4	15.4	124,043	12.9	416.1	84,010	8.8	281.8	54,482	5.7	182.7	14,449	1.5	48.5	11.6
1592	Thebemed	Energy	3,269	11,251	24.6	0.1	4,691	7.9	119.6	3,831	6.5	97.7	-	-	-	(859)	-1.5	-21.9	-18.3
		Frontier	932	3,153	27.1	0.7	1,998	8.4	178.7	1,974	8.3	176.5	-	-	-	(24)	-0.1	-2.1	-1.2
		Universal	181	329	27.7	1.5	1,090	81.6	501.7	1,408	105.4	648.3	-	-	-	318	23.8	146.5	29.2
		Consolidated	4,382	14,733	25.2	0.2	7,779	9.2	147.9	7,214	8.5	137.2	-	-	-	(565)	-0.7	-10.7	-7.3
1422	Topmed Medical Scheme	Topmed 100%	345	497	63.0	54.7	572	2.6	138.1	559	2.5	135.0	39	0.2	9.3	26	0.1	6.3	4.5
		Topmed 80%	699	1,215	58.5	47.3	1,335	4.1	159.1	1,225	3.8	146.1	70	0.2	8.3	(40)	-0.1	-4.8	-3.0
		Topmed Network	3,956	7,718	28.1	2.6	14,539	30.5	306.3	11,232	23.6	236.6	-	-	-	(3,307)	-6.9	-69.7	-22.7
		Topmed Hospital Plan	1,193	2,457	36.7	11.4	131	0.8	9.2	91	0.6	6.4	-	-	-	(40)	-0.2	-2.8	-30.7
		Topmed Incentive Comprehensive	2,245	5,072	42.8	17.0	3,485	4.4	129.4	1,922	2.4	71.3	(1,369)	-1.7	-50.8	(2,932)	-3.7	-108.8	-84.1
		Topmed Incentive Savings	3,167	8,063	33.0	6.1	2,231	3.3	58.7	2,692	3.9	70.8	1,205	1.8	31.7	1,665	2.4	43.8	74.6
		Topmed Limited 100%	962	1,825	48.9	30.7	956	3.2	82.8	1,155	3.9	100.0	575	2.0	49.8	774	2.6	67.1	81.0
		Consolidated	12,567	26,847	36.6	12.1	23,249	7.8	154.2	18,876	6.4	125.2	520	0.2	3.4	(3,853)	-1.3	-25.5	-16.6
		Sub-total: registered open schemes			2,144,369	4,815,334	32.9	7.3	2,015,638	3.7	78.3	1,888,115	3.5	73.4	63,410	0.1	2.5	(64,113)	-0.1
Registered schemes: restricted																			
1005	AECI Medical Aid Society	Basic Carecross	1,523	4,046	27.2	0.3	6,275	26.2	343.3	6,596	27.5	360.9	-	-	-	322	1.3	17.6	5.1
		Comprehensive	5,800	11,385	46.8	30.9	1,442	0.7	20.7	1,527	0.7	21.9	-	-	-	85	-	1.2	5.9
		Consolidated	7,323	15,431	41.6	22.7	7,717	3.3	87.8	8,123	3.5	92.4	-	-	-	406	0.2	4.6	5.3
1487	Afrisam SA Medical Scheme	Afrisam Budget	91	180	33.8	6.7	5	0.2	4.5	10	0.5	9.4	-	-	-	5	0.3	4.9	109.3
		Afrisam Deluxe	111	230	50.4	23.9	6	0.1	4.2	12	0.2	8.8	-	-	-	6	0.1	4.6	109.3

# Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

Ref. no.	Name of medical scheme	Name of benefit option	Members	Beneficiaries	Average age	Pensioner ratio	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income /
			As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As %	pmpm	R'000	As %	pmpm	R'000	As %	pmpm	R'000	As %	pmpm	(expense) as % of
								of GCI	R		of GCI	R		of GCI	R		of GCI	R	capitation fees
<b>Registered schemes:</b>																			
<b>restricted continued</b>																			
1487	Afrisam SA Medical Scheme continued	Afrisam Standard	947	2,038	42.6	23.0	49	0.2	4.3	103	0.3	9.1	-	-	-	54	0.2	4.7	109.3
		Consolidated	1,149	2,448	42.7	21.9	60	0.2	4.3	125	0.3	9.1	-	-	-	65	0.2	4.7	109.3
1567	Afrox Medical Aid Society	Base Plan	3,157	7,391	30.3	5.3	326	0.4	8.6	322	0.4	8.5	-	-	-	(4)	-	-0.1	-1.3
		Diamond Plan	119	167	71.5	82.4	27	0.4	18.8	27	0.4	18.6	-	-	-	(0)	-	-0.3	-1.3
		Consolidated	3,276	7,558	31.4	7.3	353	0.4	9.0	348	0.4	8.9	-	-	-	(5)	-	-0.1	-1.3
1456	Alliance Midmed Medical Scheme	Alliance Midmed Policy 120	1,866	4,818	27.4	3.0	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	1,866	4,818	27.4	3.0	-	-	-	-	-	-	-	-	-	-	-	-	-
1534	Altron Medical Aid Scheme	Basic	1,184	2,370	35.0	13.2	1,133	3.7	79.8	979	3.2	68.9	-	-	-	(154)	-0.5	-10.9	-13.6
		Enhanced	3,052	7,074	37.0	12.3	3,480	3.4	95.0	3,006	3.0	82.1	-	-	-	(474)	-0.5	-12.9	-13.6
		Consolidated	4,236	9,444	36.5	12.5	4,613	3.5	90.8	3,985	3.0	78.4	-	-	-	(629)	-0.5	-12.4	-13.6
1012	Anglo Medical Scheme	Managed Care Plan	6,680	14,339	45.9	27.6	13,054	4.5	162.8	13,415	4.7	167.4	-	-	-	361	0.1	4.5	2.8
		Standard Care Plan	4,822	11,950	30.0	6.7	4,659	4.4	80.5	5,671	5.3	98.0	-	-	-	1,012	1.0	17.5	21.7
		Value Care Plan	244	629	24.5	1.6	1,732	88.5	591.6	1,116	57.0	381.2	-	-	-	(616)	-31.5	-210.5	-35.6
		Consolidated	11,746	26,918	38.3	17.7	19,445	4.9	138.0	20,202	5.1	143.3	-	-	-	757	0.2	5.4	3.9
1571	Anglovaal Group Medical Scheme	Anglovaal Group Medical Scheme	4,289	8,805	39.2	18.9	902	0.7	17.5	803	0.6	15.6	-	-	-	(99)	-0.1	-1.9	-11.0
		Consolidated	4,289	8,805	39.2	18.9	902	0.7	17.5	803	0.6	15.6	-	-	-	(99)	-0.1	-1.9	-11.0
1279	Bankmed	Bankmed Basic	13,705	21,747	23.8	0.7	34,650	24.2	210.7	46,635	32.6	283.6	-	-	-	11,985	8.4	72.9	34.6
		Bankmed Comprehensive	51,714	107,794	31.4	7.6	25,925	1.8	41.8	31,854	2.3	51.3	-	-	-	5,929	0.4	9.6	22.9
		Bankmed Core	10,967	18,366	23.5	1.0	896	0.6	6.8	983	0.6	7.5	-	-	-	87	0.1	0.7	9.7
		Bankmed Plus	6,623	14,797	41.1	17.0	617	0.2	7.8	645	0.2	8.1	-	-	-	28	-	0.4	4.5
		Bankmed Traditional	17,496	37,252	28.3	3.6	8,567	2.0	40.8	13,615	3.2	64.8	-	-	-	5,048	1.2	24.0	58.9
		Consolidated	100,505	199,956	30.0	6.2	70,654	2.9	58.6	93,731	3.8	77.7	-	-	-	23,077	0.9	19.1	32.7
1507	Barloworld Medical Scheme	Barloworld Medical Scheme	5,865	12,505	38.5	18.6	2,227	1.1	31.6	3,386	1.6	48.1	-	-	-	1,159	0.6	16.5	52.1
		Consolidated	5,865	12,505	38.5	18.6	2,227	1.1	31.6	3,386	1.6	48.1	-	-	-	1,159	0.6	16.5	52.1
1526	BMW Employees Medical Aid Society	BMW Option 119	2,221	6,137	29.7	1.7	262	0.4	9.8	169	0.3	6.3	-	-	-	(93)	-0.1	-3.5	-35.6
		Consolidated	2,221	6,137	29.7	1.7	262	0.4	9.8	169	0.3	6.3	-	-	-	(93)	-0.1	-3.5	-35.6
1237	BP Medical Aid Society	BPSA Medical Society	2,367	5,360	39.9	20.2	1,287	2.1	45.3	1,725	2.8	60.7	-	-	-	438	0.7	15.4	34.0



## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
<b>Registered schemes:</b>																			
<b>restricted continued</b>																			
1237	BP Medical Aid Society continued	Consolidated	2,367	5,360	39.9	20.2	1,287	2.1	45.3	1,725	2.8	60.7	-	-	-	438	0.7	15.4	34.0
1590	Building & Construction Industry Medical Aid Fund	Basic option	5,036	12,654	30.6	3.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	5,036	12,654	30.6	3.3	-	-	-	-	-	-	-	-	-	-	-	-	-
1593	Built Environment Professional Associations Medical Scheme (BEPMED)	Pro-Basic	169	301	26.7	1.7	539	33.3	265.9	730	45.1	359.9	-	-	-	191	11.8	94.0	35.4
		Pro-Core	1,066	2,367	29.5	3.8	123	0.7	9.6	23	0.1	1.8	-	-	-	(100)	-0.6	-7.8	-81.3
		Pro-Elite	835	2,102	37.9	8.4	93	0.3	9.3	56	0.2	5.6	-	-	-	(37)	-0.1	-3.7	-39.9
		Consolidated	2,070	4,770	33.0	5.7	755	1.4	30.4	809	1.5	32.6	-	-	-	54	0.1	2.2	7.1
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)	CA - Alliance	1,126	2,436	39.8	15.3	394	0.6	29.1	495	0.8	36.6	-	-	-	101	0.2	7.5	25.8
		CA - Double Plus	8,892	18,558	28.2	4.0	2,888	0.9	27.1	1,840	0.6	17.2	-	-	-	(1,047)	-0.3	-9.8	-36.3
		CA - First Choice	6,857	8,571	27.9	4.7	1,357	1.7	16.5	390	0.5	4.7	-	-	-	(967)	-1.2	-11.8	-71.3
		CA - Vital	5,068	8,839	30.0	5.0	1,433	1.6	23.6	415	0.5	6.8	-	-	-	(1,019)	-1.1	-16.7	-71.1
		Network Choice	1,825	2,858	23.4	0.4	6,389	26.2	291.7	4,285	17.6	195.6	-	-	-	(2,105)	-8.6	-96.1	-32.9
		Consolidated	23,768	41,262	28.8	4.8	12,461	2.2	43.7	7,425	1.3	26.0	-	-	-	(5,036)	-0.9	-17.7	-40.4
1521	Clicks Group Medical Scheme	Clicks Group Medical Scheme	644	1,313	32.0	3.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	644	1,313	32.0	3.7	-	-	-	-	-	-	-	-	-	-	-	-	-
1068	De Beers Benefit Society	De Beers Benefit Society	7,092	15,980	38.4	13.0	641	0.3	7.5	1,283	0.6	15.1	-	-	-	641	0.3	7.5	100.0
		Consolidated	7,092	15,980	38.4	13.0	641	0.3	7.5	1,283	0.6	15.1	-	-	-	641	0.3	7.5	100.0
1484	Edcon Medical Aid Scheme	Essential	859	1,665	44.0	23.2	310	1.0	30.0	271	0.9	26.3	-	-	-	(39)	-0.1	-3.7	-12.5
		Comprehensive																	
		Essential Limited	1,254	2,600	28.6	4.4	-	-	-	-	-	-	-	-	-	-	-	-	-
		Essential Saver	1,556	3,093	26.7	3.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	3,669	7,358	31.3	8.2	310	0.4	7.0	271	0.3	6.2	-	-	-	(39)	-	-0.9	-12.5
1572	Engen Medical Benefit Fund	Engen Medical Benefit Fund	3,551	8,257	35.8	12.8	280	0.2	6.6	215	0.2	5.1	-	-	-	(65)	-0.1	-1.5	-23.1
		Consolidated	3,551	8,257	35.8	12.8	280	0.2	6.6	215	0.2	5.1	-	-	-	(65)	-0.1	-1.5	-23.1
1585	Eythumed Medical Scheme	Option 508	3,303	6,736	32.9	0.6	14,553	43.1	367.2	13,455	39.9	339.5	-	-	-	(1,098)	-3.3	-27.7	-7.5
		Consolidated	3,303	6,736	32.9	0.6	14,553	43.1	367.2	13,455	39.9	339.5	-	-	-	(1,098)	-3.3	-27.7	-7.5



## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

Ref. no.	Name of medical scheme	Name of benefit option	Members	Beneficiaries	Average age	Pensioner ratio	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income /
			As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As %	pmpm	R'000	As %	pmpm	R'000	As %	pmpm	R'000	As %	pmpm	(expense) as % of
								of GCI	R		of GCI	R		of GCI	R		of GCI	R	capitation fees
<b>Registered schemes:</b>																			
<b>restricted continued</b>																			
1271	Fishing Industry Medical Scheme (Fishmed)	Primary	662	1,666	25.0	0.4	-	-	-	-	-	-	-	-	-	-	-	-	-
		Standard	176	479	25.8	0.2	939	62.4	444.6	850	56.5	402.7	-	-	-	(88)	-5.9	-41.9	-9.4
		Consolidated	838	2,145	25.2	0.3	939	22.5	93.4	850	20.4	84.6	-	-	-	(88)	-2.1	-8.8	-9.4
1086	Food Workers Medical Benefit Fund	Food Workers Medical Benefit Fund	14,412	19,838	30.4	0.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	14,412	19,838	30.4	0.3	-	-	-	-	-	-	-	-	-	-	-	-	-
1578	Foschini Group Medical Aid Scheme	Plan A	1,468	2,881	25.9	1.6	-	-	-	-	-	-	-	-	-	-	-	-	-
		Plan B	1,164	2,587	34.4	9.6	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	2,632	5,468	29.9	5.4	-	-	-	-	-	-	-	-	-	-	-	-	-
1568	Gold Fields Medical Scheme	Pride Plan	982	1,806	27.7	0.1	4,456	59.8	378.1	2,580	34.6	218.9	-	-	-	(1,876)	-25.2	-159.2	-42.1
		Heritage Plan	7,874	18,022	29.5	1.5	6,968	4.4	73.7	11,804	7.5	124.9	-	-	-	4,835	3.1	51.2	69.4
		Consolidated	8,856	19,828	29.4	1.4	11,424	6.9	107.5	14,383	8.7	135.3	-	-	-	2,959	1.8	27.8	25.9
1270	Golden Arrow Employees Medical Benefit Fund	Advance	354	901	37.2	6.4	3,330	89.9	783.9	4,089	110.4	962.6	72	1.9	16.9	831	22.4	195.6	25.0
		Primary	146	202	69.9	81.2	15	4.0	8.8	18	4.7	10.5	-	-	-	3	0.7	1.7	18.7
		Standard	2,233	5,404	30.2	3.5	10,242	66.3	382.2	10,837	70.1	404.4	451	2.9	16.8	1,046	6.8	39.0	10.2
		Consolidated	2,733	6,507	32.4	6.3	13,587	69.5	414.3	14,945	76.4	455.7	523	2.7	15.9	1,880	9.6	57.3	13.8
1598	Government Employees Medical Scheme (GEMS)	Beryl	11,993	31,646	27.6	2.6	123,032	77.8	854.9	105,128	66.5	730.5	(350)	-0.2	-2.4	(18,254)	-11.5	-126.8	-14.8
		Emerald	312,827	879,829	25.6	1.8	48,015	0.7	12.8	46,894	0.7	12.5	-	-	-	(1,122)	-	-0.3	-2.3
		Onyx	29,568	71,809	35.2	9.0	4,968	0.5	14.0	4,265	0.5	12.0	-	-	-	(703)	-0.1	-2.0	-14.1
		Ruby	34,290	92,673	25.4	1.3	5,386	0.8	13.1	4,110	0.6	10.0	-	-	-	(1,276)	-0.2	-3.1	-23.7
		Sapphire	21,126	71,940	26.6	1.2	107,165	48.2	422.7	86,487	38.9	341.2	6,601	3.0	26.0	(14,077)	-6.3	-55.5	-13.1
		Consolidated	409,804	1,147,897	26.3	2.2	288,566	3.2	58.7	246,885	2.8	50.2	6,251	0.1	1.3	(35,431)	-0.4	-7.2	-12.3
1523	Grintek Electronics Medical Aid Scheme	Option I	1,140	2,817	30.7	2.7	164	0.6	12.0	84	0.3	6.1	-	-	-	(81)	-0.3	-5.9	-49.0
		Consolidated	1,140	2,817	30.7	2.7	164	0.6	12.0	84	0.3	6.1	-	-	-	(81)	-0.3	-5.9	-49.0
1111	IBM (SA) Medical Scheme	Essential Comprehensive	2,243	5,086	35.0	8.8	1,104	1.9	41.0	966	1.7	35.9	-	-	-	(138)	-0.2	-5.1	-12.5
		Consolidated	2,243	5,086	35.0	8.8	1,104	1.9	41.0	966	1.7	35.9	-	-	-	(138)	-0.2	-5.1	-12.5
1591	Impala Medical Plan	Impala Medical Plan	7,526	16,034	30.4	2.1	46,743	90.5	517.6	69,057	133.7	764.6	-	-	-	22,314	43.2	247.1	47.7
		Consolidated	7,526	16,034	30.4	2.1	46,743	90.5	517.6	69,057	133.7	764.6	-	-	-	22,314	43.2	247.1	47.7
1559	Imperial Group Medical Scheme	Imperial Group Medical Scheme	6,118	14,526	28.8	2.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	6,118	14,526	28.8	2.3	-	-	-	-	-	-	-	-	-	-	-	-	-



## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: restricted continued																			
1145	LA-Health Medical Scheme	LA Active	8,686	22,173	28.0	4.1	-	-	-	-	-	-	-	-	-	-	-	-	-
		LA Comprehensive	3,679	5,962	57.3	46.0	2,847	1.8	64.5	2,501	1.6	56.6	-	-	-	(346)	-0.2	-7.8	-12.2
		LA Core	6,596	11,399	56.1	41.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		LA Focus	2,858	6,645	29.5	5.4	-	-	-	-	-	-	-	-	-	-	-	-	-
		LA Keyplus	2,786	6,683	26.5	1.5	8,730	26.5	261.1	6,379	19.4	190.8	-	-	-	(2,351)	-7.1	-70.3	-26.9
		Consolidated	24,605	52,862	37.4	16.8	11,577	1.6	39.2	8,880	1.3	30.1	-	-	-	(2,697)	-0.4	-9.1	-23.3
1197	Libcare Medical Scheme	Libcare	5,702	12,830	29.5	5.1	407	0.2	5.9	488	0.3	7.1	-	-	-	82	-	1.2	20.1
		Consolidated	5,702	12,830	29.5	5.1	407	0.2	5.9	488	0.3	7.1	-	-	-	82	-	1.2	20.1
1599	Lonmin Medical Scheme	Lonmin Medical Scheme Benefit Plan	13,840	14,792	35.7	-	32,351	45.7	194.8	40,760	57.6	245.4	-	-	-	8,409	11.9	50.6	26.0
		Consolidated	13,840	14,792	35.7	-	32,351	45.7	194.8	40,760	57.6	245.4	-	-	-	8,409	11.9	50.6	26.0
1547	Malcor Medical Scheme	Plan A	1,651	4,009	40.5	15.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Plan B	2,518	5,811	30.0	3.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Plan C	430	692	31.3	3.5	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	4,599	10,512	34.1	8.2	-	-	-	-	-	-	-	-	-	-	-	-	-
1495	Massmart Health Plan	Massmart Health Plan	2,189	4,797	30.7	2.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	2,189	4,797	30.7	2.2	-	-	-	-	-	-	-	-	-	-	-	-	-
1039	MBMed Medical Aid Fund	MBMed	3,303	8,746	29.9	4.6	5,223	6.0	131.8	6,493	7.5	163.8	-	-	-	1,270	1.5	32.1	24.3
		Consolidated	3,303	8,746	29.9	4.6	5,223	6.0	131.8	6,493	7.5	163.8	-	-	-	1,270	1.5	32.1	24.3
1588	MEDCOR	Core	4,739	13,242	26.9	0.4	962	0.6	16.9	1,211	0.8	21.3	-	-	-	249	0.2	4.4	25.9
		Core Plus	11,183	27,271	37.9	10.6	2,181	0.6	16.3	1,913	0.5	14.3	-	-	-	(268)	-0.1	-2.0	-12.3
		Consolidated	15,922	40,513	34.3	7.2	3,143	0.6	16.4	3,124	0.6	16.4	-	-	-	(19)	-	-0.1	-0.6
1548	Medipos Medical Scheme	Option A	2,801	4,466	57.8	51.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Option B	6,714	16,001	30.5	5.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		Option C	1,187	2,664	28.1	0.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	10,702	23,131	35.5	13.9	-	-	-	-	-	-	-	-	-	-	-	-	-
1535	Metrocare	Metrocare Plan 211	1,484	3,584	36.9	7.8	1,318	2.5	74.0	2,176	4.1	122.2	-	-	-	858	1.6	48.2	65.1
		Consolidated	1,484	3,584	36.9	7.8	1,318	2.5	74.0	2,176	4.1	122.2	-	-	-	858	1.6	48.2	65.1
1105	Metropolitan Medical Scheme	Classic	1,552	3,274	21.6	0.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		Premier	4,182	10,430	29.3	5.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	5,734	13,704	27.5	4.2	-	-	-	-	-	-	-	-	-	-	-	-	-

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: restricted continued																			
1569	Minemed Medical Scheme	Affordable Option	754	1,619	28.7	1.4	3,962	53.0	437.8	2,779	37.1	307.2	-	-	-	(1,182)	-15.8	-130.7	-29.8
		Optimum	226	450	41.0	14.2	152	1.6	55.9	290	3.2	106.9	-	-	-	138	1.5	50.9	91.1
		Primary Plus	109	165	49.7	32.7	76	4.4	58.0	110	6.4	83.9	-	-	-	34	2.0	25.9	44.6
		Essential	5,509	12,361	37.3	9.3	5,724	3.7	86.6	10,043	6.4	151.9	-	-	-	4,319	2.8	65.3	75.5
		Consolidated	6,598	14,595	36.6	8.8	9,913	5.7	125.2	13,222	7.6	167.0	-	-	-	3,309	1.9	41.8	33.4
1566	Moremed Medical Scheme	Hospital	116	195	39.4	15.9	119	7.3	85.2	178	11.0	128.2	-	-	-	60	3.7	43.0	50.4
		Major Medical	157	264	24.7	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		Major Medical Plan with CareCross	1,107	1,987	24.4	1.2	3,266	33.8	245.8	3,559	36.9	267.9	-	-	-	293	3.0	22.1	9.0
		Consolidated	1,380	2,446	25.6	2.3	3,384	28.0	204.4	3,737	31.0	225.7	-	-	-	353	2.9	21.3	10.4
1600	Motohealth Care	Classic	15,796	37,613	33.8	8.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Custom	9,334	22,414	26.8	1.9	31,905	27.7	284.8	39,959	34.6	356.8	-	-	-	8,054	7.0	71.9	25.2
		Essential	7,940	18,480	27.2	0.5	24,748	77.2	259.7	30,530	95.2	320.4	-	-	-	5,782	18.0	60.7	23.4
		Hospicare	3,111	5,587	37.9	19.8	-	-	-	-	-	-	-	-	-	-	-	-	-
		Optimum	2,935	6,802	39.5	11.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	39,116	90,896	31.4	6.3	56,652	#N/A	120.7	70,489	#N/A	150.2	-	#N/A	-	13,837	#N/A	29.5	24.4
1154	Nampak SA Medical Scheme	Extended Option	2,599	5,903	41.8	16.4	245	0.2	7.9	339	0.3	10.9	-	-	-	94	0.1	3.0	38.3
		Standard Option	2,651	6,601	28.9	3.1	244	0.4	7.7	319	0.6	10.0	-	-	-	75	0.1	2.4	30.8
		Consolidated	5,250	12,504	35.0	9.4	489	0.3	7.8	657	0.4	10.4	-	-	-	169	0.1	2.7	34.6
1241	Naspers Medical Fund	M-Med Option	2,279	4,921	30.3	1.8	683	1.3	25.0	592	1.1	21.7	-	-	-	(91)	-0.2	-3.3	-13.3
		N Option Basic	599	1,033	25.8	0.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		N Option Plus	3,566	6,841	35.2	9.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	6,444	12,795	32.6	5.7	683	0.4	8.8	592	0.4	7.7	-	-	-	(91)	-0.1	-1.2	-13.3
1469	Nedgroup Medical Aid Scheme	Hospital	4,071	7,113	30.6	5.6	6,728	15.5	137.7	6,743	15.5	138.0	-	-	-	15	-	0.3	0.2
		Network	1,374	3,278	36.8	13.2	43,583	115.5	2,643.3	44,151	117.0	2,677.8	-	-	-	568	1.5	34.5	1.3
		Platinum	2,476	6,002	39.3	14.7	4,159	4.5	140.0	4,153	4.5	139.8	-	-	-	(6)	-	-0.2	-0.1
		Savings	9,880	17,114	27.1	3.3	16,377	10.9	138.1	16,423	11.0	138.5	-	-	-	46	-	0.4	0.3
		Traditional	7,162	15,388	38.2	15.1	12,302	6.6	143.1	12,060	6.5	140.3	-	-	-	(242)	-0.1	-2.8	-2.0
		Consolidated	24,963	48,895	33.2	9.4	83,149	16.3	277.6	83,531	16.4	278.8	-	-	-	382	0.1	1.3	0.5
1584	Netcare Medical Scheme	Netcare Savings Option	15,780	36,709	27.5	2.1	2,376	0.6	12.5	2,274	0.5	12.0	-	-	-	(102)	-	-0.5	-4.3
		Consolidated	15,780	36,709	27.5	2.1	2,376	0.6	12.5	2,274	0.5	12.0	-	-	-	(102)	-	-0.5	-4.3

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes:																			
restricted continued																			
I214	Old Mutual Staff Medical Aid Fund	Hospital Plan	1,790	3,663	31.7	7.8	-	-	-	-	-	-	-	-	-	-	-	-	-
		Network Plan	1,110	2,156	30.7	6.9	3,441	22.6	258.3	3,765	24.8	282.6	-	-	-	324	2.1	24.3	9.4
		Savings Plan	3,274	7,084	28.2	3.6	-	-	-	-	-	-	-	-	-	-	-	-	-
		Traditional Plan	7,555	15,922	33.6	9.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Traditional Plus Plan	693	1,273	47.9	28.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	14,422	30,098	32.5	8.4	3,441	1.1	19.9	3,765	1.2	21.8	-	-	-	324	0.1	1.9	9.4
I441	Parmed Medical Aid Scheme	Plan - 007	2,304	5,619	44.0	24.8	541	0.4	19.6	316	0.2	11.4	-	-	-	(226)	-0.2	-8.2	-41.7
		Consolidated	2,304	5,619	44.0	24.8	541	0.4	19.6	316	0.2	11.4	-	-	-	(226)	-0.2	-8.2	-41.7
I515	PG Bison Medical Aid Society	PG Bison	635	1,368	39.2	15.4	729	3.6	-	572	2.8	-	-	-	-	(158)	-0.8	-	-21.6
		Consolidated	635	1,368	39.2	15.4	729	3.6	95.7	572	2.8	75.0	-	-	-	(158)	-0.8	-20.7	-21.6
I186	PG Group Medical Scheme	PG Group Medical Scheme	1,239	2,641	34.5	12.8	3,532	8.0	237.5	2,446	5.6	164.5	181	0.4	12.2	(904)	-2.1	-60.8	-25.6
		Consolidated	1,239	2,641	34.5	12.8	3,532	8.0	237.5	2,446	5.6	164.5	181	0.4	12.2	(904)	-2.1	-60.8	-25.6
I563	Pick & Pay Medical Scheme	Pick & Pay Medical Scheme	7,695	16,324	28.8	3.1	6,075	3.4	65.8	5,494	3.1	59.5	-	-	-	(581)	-0.3	-6.3	-9.6
		Consolidated	7,695	16,324	28.8	3.1	6,075	3.4	65.8	5,494	3.1	59.5	-	-	-	(581)	-0.3	-6.3	-9.6
I583	Platinum Health	Basic Option	8,102	8,637	38.5	-	1,563	3.7	16.1	1,742	4.2	17.9	-	-	-	179	0.4	1.8	11.5
		Enhanced Option	23,696	46,610	29.5	2.8	7,992	2.8	28.1	8,959	3.2	31.5	-	-	-	968	0.3	3.4	12.1
		Consolidated	31,798	55,247	30.9	2.3	9,554	2.9	25.0	10,701	3.3	28.0	-	-	-	1,147	0.4	3.0	12.0
I194	Profmed	Pro Active	9,811	27,185	32.9	5.1	-	-	-	-	-	-	-	-	-	-	-	-	-
		Pro Active Plus	2,743	6,108	31.4	4.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Pro Pinnacle	2,623	5,683	48.8	25.8	-	-	-	-	-	-	-	-	-	-	-	-	-
		Pro Secure	7,230	18,344	39.6	13.0	-	-	-	-	-	-	-	-	-	-	-	-	-
		Pro Secure Plus	2,139	4,674	41.7	16.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	24,546	61,994	36.8	10.1	-	-	-	-	-	-	-	-	-	-	-	-	-
I516	Quantum Medical Aid Society	Essential Comprehensive	878	1,781	41.4	17.4	434	1.5	41.2	375	1.3	35.6	-	-	-	(59)	-0.2	-5.6	-13.7
		Essential Saver	5,380	11,374	29.7	5.4	651	0.8	10.1	562	0.7	8.7	-	-	-	(89)	-0.1	-1.4	-13.7
		Keycare Plus	690	1,355	24.1	1.3	2,006	27.5	242.2	1,821	25.0	220.0	-	-	-	(184)	-2.5	-22.3	-9.2
		Consolidated	6,948	14,510	30.6	6.5	3,090	2.5	37.1	2,757	2.2	33.1	-	-	-	(333)	-0.3	-4.0	-10.8

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

Members				Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: restricted continued																			
I201	Rand Water Medical Scheme	Option A	2,511	6,823	29.7	6.8	1,807	2.1	60.0	1,465	1.7	48.6	-	-	-	(341)	-0.4	-11.3	-18.9
		Option B	389	397	44.9	-	2,874	92.3	615.7	1,659	53.3	355.5	-	-	-	(1,215)	-39.0	-260.2	-42.3
		Consolidated	2,900	7,220	30.6	6.4	4,681	5.2	134.5	3,125	3.5	89.8	-	-	-	(1,556)	-1.7	-44.7	-33.2
I430	Remedi Medical Aid Scheme	Classic	5,491	11,303	27.1	3.5	685	0.5	10.4	760	0.6	11.5	-	-	-	75	0.1	1.1	10.9
		Comprehensive	7,368	18,149	32.8	6.2	980	0.4	11.1	1,020	0.4	11.5	-	-	-	40	-	0.5	4.1
		Standard	2,625	6,268	25.7	1.2	10,204	24.8	324.0	10,394	25.3	330.0	-	-	-	190	0.5	6.0	1.9
		Consolidated	15,484	35,720	29.8	4.5	11,870	2.6	63.9	12,175	2.7	65.5	-	-	-	305	0.1	1.6	2.6
I176	Retail Medical Scheme	Essential	369	733	50.9	29.6	296	1.4	66.8	255	1.2	57.5	-	-	-	(41)	-0.2	-9.3	-13.9
		Comprehensive Option																	
		Essential Option	5,212	9,727	26.4	0.7	-	-	-	-	-	-	-	-	-	-	-	-	-
		Essential Plus Option	1,370	2,660	42.8	22.0	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	6,951	13,120	31.1	6.6	296	0.3	3.5	255	0.2	3.1	-	-	-	(41)	-	-0.5	-13.9
I013	Rhodes University Medical Scheme	RUMED	1,004	2,164	39.0	14.3	117	0.5	9.7	109	0.5	9.1	-	-	-	(8)	-	-0.6	-6.4
		Consolidated	1,004	2,164	39.0	14.3	117	0.5	9.7	109	0.5	9.1	-	-	-	(8)	-	-0.6	-6.4
I209	SA Breweries Medical Aid Society	Castellion Option	2,956	6,936	25.6	0.9	290	0.7	8.2	188	0.5	5.3	-	-	-	(102)	-0.3	-2.9	-35.1
		SAB Option	6,479	14,578	29.9	5.6	638	0.3	8.2	386	0.2	5.0	-	-	-	(251)	-0.1	-3.2	-39.4
		Consolidated	9,435	21,514	28.5	4.1	928	0.4	8.2	575	0.3	5.1	-	-	-	(353)	-0.2	-3.1	-38.1
I424	SABC Medical Aid Scheme	SABC Plan 009	4,604	10,058	34.1	10.6	2,108	1.4	38.2	3,050	2.0	55.2	-	-	-	942	0.6	17.0	44.7
		Consolidated	4,604	10,058	34.1	10.6	2,108	1.4	38.2	3,050	2.0	55.2	-	-	-	942	0.6	17.0	44.7
I038	SAMWUMed	Option A	16,884	40,324	31.9	5.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Option B	13,387	32,760	28.2	2.0	1,677	0.7	10.4	1,747	0.7	10.9	-	-	-	70	-	0.4	4.2
		Consolidated	30,271	73,084	30.2	3.8	1,677	0.3	4.6	1,747	0.4	4.8	-	-	-	70	-	0.2	4.2
I527	Sappi Medical Aid Scheme	Sappi Medical Aid Scheme	4,086	9,443	36.0	12.6	490	0.4	10.0	827	0.6	16.9	-	-	-	337	0.2	6.9	68.9
		Consolidated	4,086	9,443	36.0	12.6	490	0.4	10.0	827	0.6	16.9	-	-	-	337	0.2	6.9	68.9
I234	Sasolmed	Sasolmed	28,227	74,603	30.4	4.7	9,933	1.1	29.3	16,400	1.8	48.4	-	-	-	6,467	0.7	19.1	65.1
		Consolidated	28,227	74,603	30.4	4.7	9,933	1.1	29.3	16,400	1.8	48.4	-	-	-	6,467	0.7	19.1	65.1
I531	Sedmed	Sedmed	865	2,023	44.4	25.0	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	865	2,023	44.4	25.0	-	-	-	-	-	-	-	-	-	-	-	-	-
I243	Siemens Medical Scheme	Siemens Medical Scheme	2,965	6,744	33.0	7.9	1,440	1.5	40.5	2,145	2.2	60.3	-	-	-	704	0.7	19.8	48.9

## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

			Members	Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: restricted continued																			
1243	Siemens Medical Scheme continued	Consolidated	2,965	6,744	33.0	7.9	1,440	1.5	40.5	2,145	2.2	60.3	-	-	-	704	0.7	19.8	48.9
1589	Solvita Medical Scheme	Option A	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		Option B	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1580	South African Police Service Medical Scheme (POLMED)	Higher Plan	89,118	279,508	27.9	3.5	11,735	0.4	11.0	13,538	0.4	12.7	-	-	-	1,802	0.1	1.7	15.4
		Lower Plan	79,458	192,805	22.1	0.7	10,036	0.8	10.5	11,578	1.0	12.1	-	-	-	1,542	0.1	1.6	15.4
		Consolidated	168,576	472,313	25.5	2.3	21,772	0.5	10.8	25,116	0.6	12.4	-	-	-	3,344	0.1	1.7	15.4
1254	Stocksmed	Stocksmed	860	1,846	34.6	6.9	73	0.3	7.0	55	0.2	5.4	-	-	-	(17)	-0.1	-1.7	-23.6
		Consolidated	860	1,846	34.6	6.9	73	0.3	7.0	55	0.2	5.4	-	-	-	(17)	-0.1	-1.7	-23.6
1544	Tiger Brands Medical Scheme	Option 1	4,972	11,482	38.3	16.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	4,972	11,482	38.3	16.2	-	-	-	-	-	-	-	-	-	-	-	-	-
1582	Transmed Medical Fund	Guardian	18,322	23,686	74.7	85.5	-	-	-	-	-	-	-	-	-	-	-	-	-
		Private Cover Plus Savings	16,637	33,297	43.9	13.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		State Plus Network	6,797	16,550	33.8	5.3	35,563	66.9	436.0	18,264	34.4	223.9	-	-	-	(17,299)	-32.6	-212.1	-48.6
		State Plus Own Choice	31,767	70,753	35.2	9.9	-	-	-	-	-	-	-	-	-	-	-	-	-
		Ubuntu	-	-	-	-	92,773	80.2	-	80,209	69.4	-	-	-	-	(12,564)	-10.9	-	-13.5
		Consolidated	73,523	144,286	43.6	22.6	128,336	10.0	145.5	98,473	7.6	111.6	-	-	-	(29,863)	-2.3	-33.8	-23.3
1579	Tsogo Sun Group Medical Scheme	Classic Comprehensive	1,373	3,191	28.6	4.1	446	1.2	27.1	398	1.0	24.2	-	-	-	(48)	-0.1	-2.9	-10.8
		Classic Saver	1,708	3,291	23.2	0.2	-	-	-	-	-	-	-	-	-	-	-	-	-
		Consolidated	3,081	6,482	25.9	2.1	446	0.7	12.1	398	0.6	10.8	-	-	-	(48)	-0.1	-1.3	-10.8
1434	Umed	Classic - Previous	6,292	14,451	43.5	15.3	-	-	-	-	-	-	-	-	-	-	-	-	-
		Option 2																	
		Value - Previous	1,724	4,132	31.7	5.8	-	-	-	-	-	-	-	-	-	-	-	-	-
		Option 1																	
		Consolidated	8,016	18,583	40.9	13.2	-	-	-	-	-	-	-	-	-	-	-	-	-
1597	Umvuzo Health Medical Scheme	Standard	5,771	14,844	27.9	0.6	28,339	34.5	409.2	28,852	35.1	416.6	-	-	-	514	0.6	7.4	1.8
		Supreme	1,245	3,052	26.0	0.4	124	0.6	8.3	314	1.6	21.0	-	-	-	190	1.0	12.7	153.9
		Ultra Affordable	9,792	13,688	33.0	0.2	26,684	39.7	227.1	29,959	44.6	255.0	-	-	-	3,274	4.9	27.9	12.3
		Consolidated	16,808	31,584	30.0	0.4	55,147	32.6	273.4	59,125	35.0	293.1	-	-	-	3,978	2.4	19.7	7.2



## Annexure T: Significant risk transfer arrangements (excluding commercial reinsurance) per option: registered schemes for the year ended 31 December 2009

Members				Beneficiaries	Average age pb	Pensioner ratio (65+ years)	Capitation fees paid			Estimated claims recoveries			Profit/(loss) sharing			Net income/(expense) on significant risk transfer arrangements			Net income / (expense) as % of capitation fees
Ref. no.	Name of medical scheme	Name of benefit option	As at 31.12.2009	As at 31.12.2009	Years	%	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	R'000	As % of GCI	pmpm R	%
Registered schemes: restricted continued																			
1520	University of Kwa-Zulu Natal Medical Scheme	Savings Plus Plan Consolidated	3,331 3,331	7,188 7,188	37.5 37.5	13.5 13.5	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -
1282	University of the Witwatersrand Staff Medical Aid Scheme	University of Witwatersrand Staff Medical Aid Consolidated	3,031 3,031	6,340 6,340	38.6 38.6	14.2 14.2	814 814	0.8 0.8	22.4 22.4	1,193 1,193	1.2 1.2	32.8 32.8	- -	- -	- -	379 379	0.4 0.4	10.4 10.4	46.6 46.6
1291	Witbank Coalfields Medical Aid Scheme	Comprehensive option Yebomed Consolidated	7,443 3,017 10,460	19,020 6,985 26,005	30.0 27.6 29.4	5.4 0.1 4.0	- 24,270 24,270	- 87.5 9.2	- 670.4 193.4	- 24,270 24,270	- 87.5 9.2	- 670.4 193.4	- - -	- - -	- - -	- - -	- - -	- - -	- - -
1293	Wooltru Healthcare Fund	Core Option Extended Option Plus Option Consolidated	662 978 7,236 8,876	1,213 2,114 14,936 18,263	27.9 37.8 27.4 28.6	3.8 14.2 2.9 4.3	6,447 1,358 9,721 17,526	90.4 4.2 7.7 10.5	811.6 115.7 112.0 164.5	5,715 1,383 10,454 17,552	80.1 4.3 8.2 10.6	719.4 117.9 120.4 164.8	- - - -	- - - -	- - - -	(732) 26 733 26	-10.3 0.1 0.6 -	-92.2 2.2 8.4 0.2	-11.4 1.9 7.5 0.2
1253	Xstrata Medical Aid Scheme	107 Consolidated	7,838 7,838	23,138 23,138	32.8 32.8	0.2 0.2	1,378 1,378	0.9 0.9	14.7 14.7	1,001 1,001	0.7 0.7	10.6 10.6	- -	- -	- -	(377) (377)	-0.3 -0.3	-4.0 -4.0	-27.4 -27.4
Sub-total: registered restricted schemes			1,343,640	3,253,171	29.7	5.3	1,019,976	3.3	63.3	1,033,288	3.4	64.1	6,955	-	0.4	20,267	0.1	1.3	2.0
Total registered schemes			3,488,009	8,068,505	31.6	6.5	3,035,614	3.6	72.5	2,921,403	3.4	69.8	70,365	0.1	1.7	(43,846)	-0.1	-1.0	-1.4

## Notes

GCI = Gross Contribution Income

pmpm = per member per month

pb = per beneficiary

\* Discontinued options: these options did not have any members at year-end, therefore the pmpm-figures, average age, and pensioner ratios could not be calculated.

The scheme was liquidated in 2009. Figures were submitted.

Purehealth Medical Scheme was liquidated with effect from 31 December 2009.

Stocksmed was liquidated with effect from 31 December 2009.

This scheme was registered in 2008. It was liquidated on 16 January 2009, therefore no figures were submitted.



## Annexure U: Administrator market share and relevant cashflows under their administration for the years ended 31 December 2008-2009

Name of administrator	No. of medical schemes	Average members	Average beneficiaries	No. of medical schemes	Average beneficiaries	Gross Contribution Income (GCI)								Net relevant healthcare expenditure incurred								Gross Administration Expenditure								Administration fees received (excl. co-administration fees)				Managed healthcare: management services received				Total fees received: administration and managed healthcare: management services			
2009	2009	2009	Market share 2009 %	2008	2008	Market share 2008 %	2009 R'000	pabpm 2009 R	Market share 2009 %	2008 R'000	pabpm 2008 R	Market share 2008 %	2009 R'000	pabpm 2009 R	Market share 2009 %	2008 R'000	pabpm 2008 R	Market share 2008 %	2009 R'000	pabpm 2009 R	As % of GCI 2009	2008 R'000	pabpm 2008 R	As % of GCI 2008	2009 R'000	pabpm R	pampm R	As % of GCI	2009 R'000	pabpm R	pampm R	As % of GCI	2009 R'000	pabpm R	pampm R	As % of GCI					
Agility Global Health Solutions Africa	2	56,696	134,535	1.7	3	207,094	2.7	1,158,393	717.5	1.4	1,477,007	594.3	2.0	1,016,310	629.5	1.5	1,436,200	577.9	2.5	148,898	92.2	12.9	132,288	53.2	9.0	102,048	63.2	150.0	8.8	41,445	25.7	60.9	3.6	143,493	88.9	210.9	12.4				
Alcare Administrators (Pty) Ltd	5	54,320	147,720	1.9	7	152,733	2.0	1,493,641	842.6	1.8	1,334,498	728.1	1.8	1,283,653	724.2	1.9	1,115,539	608.7	1.9	194,876	109.9	13.0	174,734	95.3	13.1	128,211	72.3	196.7	8.6	19,807	16.2	47.0	2.1	148,017	83.5	227.1	9.9				
Discovery Health (Pty) Ltd	12	969,922	2,144,698	27.0	11	2,065,983	26.8	25,571,505	993.6	30.1	22,274,793	898.5	30.1	16,568,969	643.8	24.0	14,135,514	570.2	24.2	2,708,856	105.3	10.6	2,410,966	97.2	10.8	2,576,398	100.1	221.4	10.1	609,162	23.7	52.3	2.4	3,185,560	123.8	273.7	12.5				
Eternity Private Health Fund Administrators (Pty) Ltd	2	27,191	47,757	0.6	2	48,090	0.6	703,214	1,227.1	0.8	647,402	1,121.9	0.9	572,543	999.1	0.8	495,313	858.3	0.8	74,232	129.5	10.6	67,906	117.7	10.5	61,444	107.2	188.3	8.7	12,236	24.9	42.7	2.2	73,680	128.6	225.8	10.5				
HDS Medical (Pty) Ltd via Multimed Healthcare Administrators																																									
HDS Medical (Pty) Ltd via Multimed	0	0	0	-	1	125,652	1.6	-	0.0	-	1,544,299	1,024.2	2.1	-	0.0	-	1,324,710	878.6	2.3	-	0.0	-	127,762	84.7	8.3	-	-	-	-	-	-	-	-	-	-	-	-				
Medischeme Holdings (Pty) Ltd																																									
Medischeme Holdings (Pty) Ltd	24	614,219	1,408,109	17.7	16	957,879	12.4	15,048,960	890.6	17.7	9,115,120	793.0	12.3	13,415,175	793.9	19.5	7,915,739	688.7	13.6	1,328,377	78.6	8.8	769,207	66.9	8.4	935,444	55.4	126.9	6.2	330,387	19.6	44.8	2.2	1,265,832	74.9	171.7	8.4				
Metropolitan Health (Pty) Ltd	4	18,124	40,150	0.5	5	56,573	0.7	418,697	869.0	0.5	590,678	870.1	0.8	359,349	745.8	0.5	504,431	743.0	0.9	30,659	63.6	7.3	49,144	72.4	8.3	25,680	53.3	118.1	6.1	-	-	-	-	25,680	53.3	118.1	6.1				
Metropolitan Health Corporate (Pty) Ltd	12	753,524	1,929,403	24.3	13	1,630,502	21.1	18,237,669	787.7	21.5	14,118,737	721.6	19.1	16,482,192	711.9	23.9	12,203,824	623.7	20.9	1,012,741	43.7	5.6	782,198	40.0	5.5	775,569	33.5	85.8	4.3	1,318	16.6	40.1	6.7	776,887	33.6	85.9	4.3				
Momentum Medical Scheme Administrators (Pty) Ltd	12	245,539	543,763	6.8	10	337,798	4.4	6,082,146	932.1	7.2	3,321,776	819.5	4.5	5,048,425	773.7	7.3	2,548,595	628.7	4.4	518,331	79.4	8.5	300,966	74.2	9.1	440,032	67.4	149.3	7.2	113,430	17.4	38.5	1.9	553,463	84.8	187.8	9.1				
Old Mutual Healthcare (Pty) Ltd																																									
Old Mutual Healthcare (Pty) Ltd	0	0	0	-	9	474,668	6.2	-	0.0	-	4,064,951	713.6	5.5	-	0.0	-	3,510,152	616.2	6.0	-	0.0	-	423,304	74.3	10.4	-	-	-	-	-	-	-	-	-	-	-	-				
Private Health Administrators (a division of Sweidan Trust (Pty) Ltd)	1	7,381	17,192	0.2	1	17,954	0.2	209,181	1,013.9	0.2	196,607	912.6	0.3	161,674	783.7	0.2	147,151	683.0	0.3	28,420	137.8	13.6	27,028	125.5	13.7	19,069	92.4	215.3	9.1	3,833	18.6	43.3	1.8	22,902	111.0	258.6	10.9				
Professional Medical Scheme Administrators (Pty) Ltd	1	24,313	61,661	0.8	1	61,625	0.8	665,555	899.5	0.8	585,472	791.7	0.8	610,862	825.6	0.9	528,010	714.0	0.9	68,903	93.1	10.4	60,289	81.5	10.3	44,763	60.5	153.4	6.7	7,481	10.1	25.6	1.1	52,244	70.6	179.1	7.8				
Prosperity Health Managers (Pty) Ltd																																									
Prosperity Health Managers (Pty) Ltd	1	0	0	-	2	-	-	-	0.0	-	-	-	-	-	0.0	-	-	0.0	-	-	0.0	-	-	-	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-			
Providence Healthcare Risk Managers (Pty) Ltd	5	22,103	51,212	0.6	5	50,094	0.6	495,061	805.6	0.6	421,201	700.7	0.6	444,872	723.9	0.6	384,353	639.4	0.7	40,662	66.2	8.2	37,771	62.8	9.0	29,004	47.2	109.4	5.9	10,839	17.6	40.9	2.2	39,844	64.8	150.2	8.0				
Resolution Health (Pty) Ltd	0	0	0	-	1	93,011	1.2	-	0.0	-	638,734	572.3	0.9	-	0.0	-	460,522	412.6	0.8	-	0.0	-	111,018	99.5	17.4	-	-	-	-	-	-	-	-	-	-	-	-				
Rowan Angel (Pty) Ltd	0	0	0	-	1	162,469	2.1	-	0.0	-	1,555,929	798.1	2.1	-	0.0	-	1,348,107	691.5	2.3	-	0.0	-	159,948	82.0	10.3	-	-	-	-	-	-	-	-	-	-	-	-	-			
Sanlam Healthcare Management (Pty) Ltd	1	39,320	88,758	1.1	1	85,833	1.1	1,038,682	975.2	1.2	891,094	865.1	1.2	720,949	676.9	1.0	609,131	591.4	1.0	124,189	116.6	12.0	101,582	98.6	11.4	73,399	68.9	155.6	7.1	23,623	22.2	50.1	2.3	97,022	91.1	205.6	9.3				
Sechaba Medical Solutions (Pty) Ltd	2	74,799	188,660	2.4	2	190,441	2.5	1,819,153	803.5	2.1	1,653,284	723.4	2.2	1,663,105	734.6	2.4	1,451,382	635.1	2.5	192,926	85.2	10.6	181,829	79.6	11.0	127,915	56.5	142.5	7.0	33,225	17.3	43.9	2.1	161,140	71.2	179.5	8.9				
Self-administered	15	351,246	740,460	9.3	16	679,162	8.8	7,756,912	873.0	9.1	6,666,271	818.0	9.0	7,018,920	789.9	10.2	5,765,392	707.4	9.9	639,104	71.9	8.2	513,561	63.0	7.7	26,749	11.8	27.8	1.6	2,827	3.0	5.6	0.4	29,576	9.2	20.2	1.3				
Sigma Health Fund Managers (Pty) Ltd	1	31,237	70,842	0.9	1	73,269	1.0	783,496	921.6	0.9	724,066	823.5	1.0	669,568	787.6	1.0	568,291	646.4	1.0	74,293	87.4	9.5	69,316	78.8	9.6	41,677	49.0	111.2	5.3	-	-	-	-	41,677	49.0	111.2	5.3				
Status Medical Aid Administrators (Pty) Ltd	6	34,172	74,169	0.9	7	76,444	1.0	766,232	860.9	0.9	712,674	774.9	1.0	739,885	831.3	1.1	678,906	738.2	1.2	75,321	84.6	9.8	83,192	90.5	11.7	63,302	71.1	154.4	8.3	274	1.2	2.1	0.1	63,576	71.4	155.0	8.3				
Thebe Ya Bophelo Healthcare Administrators (Pty) Ltd	1	4,453	14,845	0.2	1	21,595	0.3	84,487	474.3	0.1	105,350	406.5	0.1	68,788	386.1	0.1	83,885	323.7	0.1	9,138	51.3	10.8	10,229	39.5	9.7	7,242	40.7	135.5	8.6	2,857	16.0	53.5	3.4	10,099	56.7	189.0	12.0				
V Med Administrators (Pty) Ltd																																									
V Med Administrators (Pty) Ltd	4	105,887	242,276	3.0	3	140,630	1.8	2,530,232	870.3	3.0	1,465,619	868.5	2.0	2,057,959	707.9	3.0	1,146,584	679.4	2.0	237,174	81.6	9.4	154,474	91.5	10.5	156,649	53.9	123.3	6.2	54,405	20.9	48.1	2.4	211,054	72.6	166.1	8.3				
Total	111	3,434,445	7,946,207	100.0	119	7,709,697	100.0	84,863,217	890.0	100.0	74,105,560	801.0	100.0	68,903,198	722.6	100.0	58,361,731	630.8	100.0	7,507,099	78.7	8.8	6,748,709	72.9	9.1	5,634,595	63.5	148.4	7.2	1,267,152	20.7	46.8	2.2	6,901,746	77.0	179.4	8.7				
Total excluding self-administered schemes	96	3,083,199	7,205,748	90.7	103	7,030,535	91.2	77,106,305	891.7	90.9	67,439,289	799.4	91.0	61,884,279	715.7	89.8	52,596,340	623.4	90.1	6,867,995	79.4	8.9	6,235,149	73.9	9.2	5,607,846	64.9	151.6	7.3	1,264,324	21.0	47.6	2.3	6,872,170	79.5	185.7	8.9				

Annexure U: Administrator market share and relevant cash flows under their administration for the years ended 31 December 2008-2009

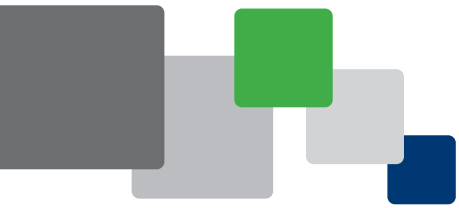
Notes

Prior year figures have been restated.  
GCI = Gross Contribution Income  
GAE = Gross Administration Expenditure  
pabpm = per average beneficiary per month  
pampm = per average member per month  
\* The number of medical schemes includes those that were in operation at any point during the year (2009). As at 31 December 2009, there were 110 registered schemes in South Africa.

The following administrators' names changed in 2009:  
PPS Medical Scheme Administrator (Pty) Ltd changed its name to Professional Medical Scheme Administrators (Pty) Ltd on 3 November 2009.  
Full Circle Health (Pty) Ltd changed its name to Agility Global Health Solutions Africa on 1 June 2009.

The following administrators' businesses were sold in 2009:  
Old Mutual Healthcare (Pty) Ltd sold their business to Lethimvula Healthcare (Pty) Ltd, who in turn sold their business to Medscheme Holdings (Pty) Ltd.  
Rowan Angel (Pty) Ltd sold their business to Medscheme Holdings (Pty) Ltd.  
HDS Medical (Pty) Ltd t/a Multimed Healthcare Administrators sold their business to Medex Trust.

The following administrators ceased operations in 2009:  
Prosperity Health Managers (Pty) Ltd  
Resolution Health (Pty) Ltd



# Explanatory notes

## to the Annexures for the year ended 31 December 2009

No medical schemes changed their names in 2009.

No new medical schemes were registered in 2009.

The following amalgamation took place in 2009:

Ref. no.	Name	Scheme amalgamated with	Ref. no.	With effect from
1560	Openplan Medical Scheme	Medihelp	1149	1 January 2009

The following medical schemes were wound-up in 2009:

Ref. no.	Name	With effect from
1589	Solvita Medical Scheme	16 January 2009
1170	Purehealth Medical Scheme	31 December 2009
1254	Stocksmed	31 December 2009

The following medical scheme did not submit any information in respect of 2009:

Ref. no.	Name	Reason
1589	Solvita Medical Scheme	Liquidated 16 January 2009

The following medical scheme submitted unaudited information in respect of 2009:

Ref. no.	Name
1537	Hosmed Medical Scheme

Please take note that the figures in the Annual Report are rounded off. The percentage variance will therefore be different to that in the Annexures.

Bargaining Council Schemes, formerly known as Exempt Schemes, were excluded from the Annexures due to lack of information.



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# Acronyms and abbreviations

A:	African	CPIX:	CPI excluding interest rates on mortgage bonds
Act:	Medical Schemes Act 131 of 1998	CSIR:	Council for Scientific and Industrial Research
ADSL:	Asymmetric Digital Subscriber Line	CT (scan):	Computerised Tomography
AFS:	Annual Financial Statements	de facto:	in fact, whether by right or not
AG:	Auditor-General	DENOSA:	Democratic Nursing Organisation of South Africa
AGM:	Annual General Meeting	DHMS:	Discovery Health Medical Scheme
AIDS:	Acquired Immune Deficiency Syndrome	DIN:	Deviation from Industry Norms
AWF:	Actuaries Without Frontiers	Discovery Health:	Discovery Health Medical Scheme
BAT:	British American Tobacco	Dr:	Doctor
BEE:	Black Economic Empowerment	DSP:	designated service provider
Beneficiaries:	principal members + dependants	DTP:	Diagnosis and Treatment Pair
BEPMED:	Built Environment Professional Associations Medical Scheme	e:	e-mail
Bestmed:	Bestmed Medical Scheme	Edms:	Eiendoms
BHF:	Board of Healthcare Funders of Southern Africa	EDMS:	Electronic Document Management Solution
BHP:	Broken Hill Proprietary Company (Australia)	EE:	Employment Equity
BMU:	Benefits Management Unit	e.g.:	<i>exempli gratia</i> (for example)
BMW:	Bayerische Motoren Werke AG (Germany)	EMS:	Environmental Monitoring Systems
Board:	Board of Trustees	excl.:	excluding
bona fide:	genuine; real	EXCO:	Executive Committee
Bonitas:	Bonitas Medical Fund	f:	fax
BoT:	Board of Trustees	FAIS:	Financial Advisory and Intermediary Services Act 37 of 2002
BP:	British Petroleum (United Kingdom)	FIFA:	Fédération Internationale de Football Association (International Federation of Association Football)
Bpk:	Beperk	Fishmed:	Fishing Industry Medical Scheme
C:	Coloured	FSB:	Financial Services Board
Calabash:	Calabash Health Solutions (Pty) Ltd	FSU:	Financial Supervision Unit
CAMAF:	Chartered Accountants (SA) Medical Aid Fund	GAAP:	Generally Accepted Accounting Principles
Cawmed:	Cawmed Medical Scheme	GAE:	Gross Administration Expenditure
CC:	Closed Corporation	GCI:	Gross Contribution Income
CDL:	Chronic Diseases List	GEMS:	Government Employees Medical Scheme
CEO:	Chief Executive Officer	Good Hope:	Good Hope Medical Aid Society
CMS:	Council for Medical Schemes	GP:	general practitioner
Council:	Council members	GRAP:	Generally Recognised Accounting Practices
COMMED:	Community Medical Aid Scheme	GUI:	Graphical User Interface
Compcare:	Compcare Wellness Medical Scheme	HDS Medical (Pty) Ltd:	HDS Medical (Pty) Ltd t/a Multimed Healthcare Administrators
COSATU:	Congress of South African Trade Unions		
CPI:	Consumer Price Index		

## Acronyms and abbreviations (continued)

HIV:	Human Immunodeficiency Virus	MOM:	Microsoft Operations Manager
Hosmed:	Hosmed Medical Aid Scheme	Moremed:	Moremed Medical Scheme
HPCSA:	Health Professions Council of South Africa	MOSS:	Microsoft Office SharePoint
HR:	Human Resources	MoU:	Memorandum of Understanding
Humanity:	Humanity Medical Scheme	Mr:	Mister
HWSETA:	Health and Welfare Sector Education and Training Authority	MRC:	Medical Research Council
I:	Indian	MRI (scan):	Magnetic Resonance Imaging
IAS:	International Accounting Standard	Ms:	Miss
IBM:	International Business Machines Company (USA)	MSAB:	Medical Schemes Amendment Bill
IBNR:	Incurred But Not Reported	NC:	Not Comparable
ICD-10:	International Classification of Diseases – 10th Revision	NCF:	National Consumer Forum
ICON:	Independent Clinical Oncology Network (Pty) Ltd	NDoH:	National Department of Health
ICU:	Intensive Care Unit	Nedgroup:	Nedgroup Medical Aid Scheme
i.e.:	<i>id est</i> (that is to say)	NHE:	Non-Healthcare Expenditure
IFRS:	International Financial Reporting Standards	NHI:	National Health Insurance
incl.:	including	NHISSA:	National Health Information System of South Africa
Ingwe:	Ingwe Health Plan	NHRPL:	National Health Reference Price List
inter alia:	among other things	NIMAS:	National Independent Medical Aid Society
IRBA:	International Regulatory Board of Auditors	no.:	number
IS:	Information Systems	NPA:	National Prosecuting Authority
ISBN:	International Standard Book Number	NPC:	Non-Profit Consortium
IS & KM:	Information Systems & Knowledge Management	NPS:	Net Promoter System
IT:	Information Technology	NUM:	National Union of Mineworkers
KM:	Knowledge Management	OCSA:	Occupational Care South Africa
KZN:	KwaZulu-Natal	Office:	Office of the Registrar (of Medical Schemes)
LAN:	Local Area Network	Oxygen:	Oxygen Medical Scheme
Liberty:	Liberty Health Medical Scheme	pab:	per average beneficiary
LIMS:	low-income medical schemes	pabpa:	per average beneficiary per annum
Lonmin:	Lonmin Medical Scheme	pabpm:	per average beneficiary per month
Mascom:	Mascom Medical Scheme	PAIA:	Promotion of Access to Information Act
MCO:	managed care organisation	pampm:	per average member per month
MEDCOR:	Medical Scheme for the Department of Correctional Services	pasbpm:	pabpm in respect of schemes that had savings transactions
Medscheme:	Medscheme Holdings (Pty) Ltd	Pathfinder:	Pathfinder Medical Scheme
Minemed:	Minemed Medical Scheme	pb:	per beneficiary
MIT:	Master Industry Table	pbpa:	per beneficiary per annum

## Acronyms and abbreviations (continued)

pbpm:	per beneficiary per month
PCNS:	Practice Code Numbering System
Pensioner:	beneficiary at least 65 years old
PET (scan):	Positron Emission Tomography
PFM:	Private Fund Managers
PFMA:	Public Finance Management Act 1 of 1999
PMB:	prescribed minimum benefit
pmpm:	per member per month
PMSA:	Professional Medical Scheme Administrators (Pty) Ltd
PO:	Principal Officer
POATIA:	Promotion of Access to Information Act
POLMED:	South African Police Service Medical Scheme
Prof.:	Professor
Protea:	Protea Medical Aid Society
(Pty) Ltd:	Proprietary Limited
Publiserve:	Publiserve Medical Scheme
Purehealth:	Purehealth Medical Scheme
PwC:	PricewaterhouseCoopers
Q:	Quarter
R:	Rand
RAF:	Risk Assessment Framework
RCI:	Risk Contribution Income
Ref.:	Reference
REF:	Risk Equalisation Fund
REFWT:	Risk Equalisation Fund Weighting Table
Registrar:	Registrar of Medical Schemes
Remedi:	Remedi Medical Aid Scheme
Renaissance Health:	Renaissance Health Medical Scheme
Resolution:	Resolution Health (Pty) Ltd
RETAP:	Risk Equalisation Technical Advisory Panel
RMA:	Rand Mutual Association
RSS:	Really Simple Syndication
SA:	South Africa(n)
SABC:	South African Broadcasting Corporation
SABINET:	Southern African Bibliographic Information Network
SABS:	South African Bureau of Standards
SAHRC:	South Africa Human Rights Commission

SAICA:	South African Institute for Chartered Accountants
SAMA:	South African Medical Association
SAMWUMed:	South African Municipal Workers Union Medical Scheme
SAPS:	South African Police Service
SASI:	South African Savings Institute
SCA:	Supreme Court of Appeal
SDLC:	Software Development Lifecycle
Sizwe:	Sizwe Medical Fund
SLA:	Service Level Agreement
SMM:	Strategic Management Meeting
SMS:	Short Message Service
Solvita:	Solvita Medical Scheme
SOP:	Standard Operating Procedure
t:	telephone
t/a:	trading as
TIP:	Trustee Induction Pack
Transmed:	Transmed Medical Fund
Treasury:	National Treasury
TV:	television
UAT:	User Acceptance Testing
Umvuzo:	Umvuzo Health Medical Scheme
UP:	University of Pretoria
UPS:	Uninterrupted Power Supply
USA:	United States of America
v:	versus
w:	website
W:	White
WAN:	Wide Area Network
WHO:	World Health Organisation
WSP:	Workplace Skills Plan



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2009-2010

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