

P O Box 74960 Lynnwood Ridge 0040

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TO: THE PRINCIPAL OFFICER

Dear Sir/Madam

PARTICIPATION IN THE ANNUAL CLINICAL QUALITY BENCHMARK SURVEY

In 2019 HQA will release its 15th annual Report. Participants can look forward to attending HQA's Clinical Quality Conference on 7th August 2019, marking its 15th year of clinical quality measurement and reporting.

Background

Measuring the quality of care is a necessary step in the process of improving health care quality. Too often the quality of care received by patients is substandard. Patients not always receive the proper diagnosis and care and wide variations in health care quality, access and outcomes persist. Research consistently shows that there is chronic underuse, overuse and misuse of services.

Collaborating on clinical quality measurement and reporting can contribute towards improving our society's health care by:

-preventing the overuse, underuse and misuse of health care and ensuring patient health and safety -identifying what works in health care and what doesn't, to drive improvement

-promoting greater accountability from medical schemes, managed care organisations and providers for providing high quality care

-measuring and addressing disparities in how care is delivered and in health outcomes -helping consumers make informed decisions about their care

Medical schemes, whether open or closed, private or public, form an integral part of the South African health care sector. It has become a national priority for schemes to demonstrate their ability to provide access to affordable, quality care. The annual HQA Report provides participants with valuable information about clinical quality that informs decisions regarding access to care, utilisation of care and outcomes relative to cost factors.

The HQA Benchmark shows year-on-year progress on the performance of each participant, the performance relative to other participants, and the performance relating to national and international benchmarks and standards. The aim of HQA is to assist participants in their quest towards sustainable funding, and the managing and provision of quality health care. HQA's results and findings are also important for policy-makers given the crucial role that medical schemes play in the national health care sector and the large number of beneficiaries who depend on schemes to help fund their health care needs.

Studies on clinical quality measurement and benchmarking indicate that health plans that regularly submit data for clinical quality measurement and benchmark reviews consistently outperform those that choose not to take part. These studies clearly illustrate the benefits of participating in annual health quality assessment.

Participants in the 2019 HQA Report can look forward to the following benefits:

- a detailed HQA Scheme Report, inclusive of a spread-sheet covering the scheme's performance on all HQA's indicators
- a comprehensive presentation of your HQA Scheme Report
- quarterly web-based updates of your performance relating to clinical quality
- data from your scheme's capitation providers will be included
- access to the 2019 HQA results presentation and clinical quality conference
- access to a comprehensive set of industry benchmarks
- Certificate of Recognition at the annual HQA results presentation
- recognition as an active participant in HQA's communications and publications to the industry
- participation in the HQA Clinical Advisory Board meetings
- receiving all HQA's communications and Communiques
- eligible for nomination and election to the HQA Board

HQA is acutely aware of the pressures on non-health care expenditure of medical schemes and offers all of the above benefits at a very affordable fee.

HQA appointed NMG Actuarial and Specialized Consulting (NMG) to take responsibility for the entire process of data collection, actuarial analyses, and compilation of the industry report and member specific reports. Participants can rest assured that the highest level of professionalism, confidentiality, and a user-friendly participation process are maintained throughout. In addition, the processes with respect to the submission of data have been simplified to the extent that the data preparation should cost the participating schemes very little if anything at all.

The HQA Survey is a progressive process that adds value every year. Measurements are grouped into sensible, storytelling categories. Indicators are selected on the basis of:

- appropriateness
- measurability
- availability of data
- being reproducible year on year
- adding value to the report
- driving decisions in managing quality of health care
- having a clear evidence-based link from process to outcome
- offering a clear indication of a direct measure or a proxy measure
- having a clear explanation for its selection, value and method of measure
- being linked to a clinical standard or guideline that endorses its use in clinical practice
- reflecting the burden of disease in South Africa, and
- being consistent with the HQA philosophy and mission statement

HQA Survey 2019: Participation

HQA urges all schemes to confirm their participation in the 2019 HQA survey as soon as possible. As soon as your confirmation has been received *NMG* will engage with your administrator and capitation provider in order to extract the data required. For HQA to deliver the Industry Results and Scheme Reports by the 7th August

2019, in time to be considered for the 2019 benefit and budget reviews, data need to be submitted before end of April 2019.

It is necessary to emphasise that HQA has committed to the delivery of the 2019 results by 7th August 2019 and that this implies that there can be no flexibility with respect to the cut-off date for data submissions.

Please complete the attached participation form and email to <u>lj.botha@iafrica.com</u>.

For more information, contact Louis Botha on 082 453 5130 or Dr Johann van Zyl NMG on 082 325 0686 or Dr Jacqui Miot (CAB Chairperson) on 08 3616 0008.

We look forward to your participation in 2019.

Yours sincerely LOUIS BOTHA CEO January 2019



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2019 HEALTH QUALITY BENCHMARK ASSESSMENT MEMBERSHIP AND PARTICIPATION APPLICATION FORM

Name of medical scheme:				
Name:	Designation:			
Date:	_ Signature:			
Contact details				
Postal address:				
Tel (Office):	Cell number:			
Fax:	E-mail:			
Name of Administrator:				
Contact person at administrator for data:				
Contact person for invoicing:				
	Advisory Board):			

2019 Fee Structure

Annual membership fee R 12 063 (will be invoiced beginning of the year).

Participation fee R 24 126 per option (will be invoiced after delivery of your Scheme Report).

To create a more equitable fee structure a minimum fee scale had been introduced: R 40 958 for schemes with less than 30000 members or R 81 916 for larger schemes, plus 39.4 cents per member. Should the peroption fee be less than the minimum scale, the latter will apply.

Schemes with less than 15000 members or low cost schemes with average annual contributions per member of less than 90% of the HQA average qualify for a 40% discount on the above participation fees based on the following criteria:

-the full fee is payable for the first year of participation.

-data needs to be submitted every year.

-a report will be provided every year.

-results will be updated every quarter.

-a scheme presentation will be provided every second year.

-the Report will be based on the scheme and not per option.

-the scheme has to be administered by one of the administrators administering existing larger HQA participants.

-capitation data will be included on the basis that it pertains to other participants as well.

-if a year is skipped the cycle starts over again, that is the full fee is payable in the first year of the new cycle.

Terms and conditions

Please note that only HQA paid up members shall have access to the HQA Reports and benchmark information. Results from HQA Reports shall not be used in the public domain for competitive gains. HQA's members are however encouraged to share their participation and results with their stakeholders and to display the HQA logo on their stationery.

Scheme members of HQA may share their reports with their administrators or managed care organisations on a confidential basis. These entities may only use the information for advice and support of the relevant schemes. They may not use the reports, benchmarks, indicators or any other intellectual property or confidential information of HQA for any non-HQA Member. Other usage requires the express written consent from the HQA Board.

Please list all your options and indicate which are capitation

Option Name ¹	Option Type ²	Network Provider – General Practitioners ³	Network Provider - Optometry ⁴	Network Provider - Dentistry⁵	Network Provider - Hospital ⁶	Network Provider - Other ⁷

Authorization to provide data to HQA

I.....(designation) of

...... (name of medical scheme), authorize

(name of network provider) to provide NMG, on behalf of HQA, with detailed claims data with respect to the

2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017 and 2018 benefit years for the following options:

- 3.
- 4.
- 5.
- 6.

Please return this form to Louis Botha via e-mail li.botha@iafrica.com.

¹ Complete a separate line for each benefit option

² Option type can be traditional (T), savings (S) or network (N) option.

³ Only indicate if members' choices are restricted to a specific general practitioner network.

⁴ Only indicate if members' choices are restricted to a specific optometry network.

⁵ Only indicate if members' choices are restricted to a specific dentistry network.

⁶ Only indicate if members' choices are restricted to a specific hospital network.

⁷ Only indicate if members' choices are restricted to any other specific provider network. Please indicate the name of the network and the type of services provided

If you have any difficulty in completing this form, please contact Louis Botha on 082 453 5130.