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TO: THE PRINCIPAL OFFICER

Dear Sir/Madam

PARTICIPATION IN THE 2014 CLINICAL QUALITY BENCHMARK SURVEY

From 2014 HQA participants can look forward to receiving scheme-specific quarterly updates in addition to the annual HQA Report. This groundbreaking enhancement to HQA's offering will allow participants to follow their progress with regards clinical quality improvement much closer.

In 2014 HQA will release its annual Report before end July. In addition participants will be provided with a secured-access web portal that will provide quarterly updates of their quality results. Participants can also look forward to attending HQA's Clinical Quality Conference, marking its 10th year of clinical quality measurement and reporting.

Background

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 conducted by the NCQA 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 2014 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 2014 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. It is worth noting that the cost of participating in HQA is less than one Rand per member per year.

In 2011, HQA appointed *Towers Watson (Pty) Ltd.* 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 2014: Participation

HQA urges all schemes to confirm their participation in the 2014 HQA survey as soon as possible. As soon as your confirmation has been received *Towers Watson (Pty) Ltd.* 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 end of July 2014, in time to be considered for the 2014 benefit and budget reviews, data need to be submitted before end of April 2014.

It is necessary to emphasise that HQA has committed to the delivery of the 2014 results at the end of July 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 lj.botha@iafrica.com or fax to 012-460 2843.

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

We look forward to your participation in 2014.

Yours sincerely

LOUIS BOTHA

CEO

February 2014

Health Quality Assessment
(Association Incorporated under Section 21)



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2014 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: _____

2014 Fee Structure

Annual membership fee R 9 101 (will be invoiced upon receipt of the Participation Letter).

Participation fee R 18 889 per option (will be invoiced after delivery of your Scheme Report).

In order to create a more equitable fee structure a minimum fee scale has been introduced: R 30 899 for schemes with less than 30000 members or R 61 798 for larger schemes, plus 29.7 cents per member.

Should the per-option fee be less than the minimum scale, the latter will apply.

Terms and conditions

Please note that only HQA paid up members should have access to the HQA Reports and benchmark information.

Results from HQA Reports should not be used in the public domain for competitive gains. HQA's members are however encouraged to share their membership and participation with their stakeholders.

Please list all your options and indicate which are capitation options

| Option Name ¹ | Option Type ² | Network Provider – General Practitioners ³ | Network Provider - Optometry ⁴ | Network Provider - Dentistry ⁵ | Network Provider - Hospital ⁶ | Network Provider - Other ⁷ |
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Authorisation to provide data to HQA

I..... (full name) as(designation) of
 (name of medical scheme), authorise
 (name of network provider) to provide Towers Watson (Pty) Ltd, on behalf of HQA, with detailed claims data with respect to the 2010, 2011, 2012 and 2013 benefit years for the following options:

1.
2.
3.
4.
5.
6.

Please return this form to **Louis Botha via fax (012 460 2843) or e-mail it to lj.botha@iafrica.com**.

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

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