



GMG

Gynaecology • Management • Group • (RF) NPC
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NEWSLETTER

2020 follows a year that was challenging, mainly due to the country's very modest economic growth. This year doesn't show much hope of an improvement, especially with strains in energy supplies due to Eskom's economic woes.

The average inflation for 2019 was 4.13% and it follows therefore that increases in reimbursement from funders will be relatively modest.

Proposed policy reforms introduced during 2019 which will impact both the private and the public sectors continue to create uncertainty amongst health service providers.

The HMI Report, which was released during September, followed an investigation into the state, nature and form of incentives which drive market behaviour in the private health sector. In summary, the Inquiry found that the private sector has:

- ◆ high and rising costs;
- ◆ significant overutilization;
- ◆ no documented improvement in health outcomes; and
- ◆ the incentives in the market are failing consumers.



Dr Conrad Mashiloane

Recommendations include a new Supply Side Health Regulator which will play an important monitoring and oversight role of other regulators and will, amongst others, be responsible for a multilateral negotiating forum to set maximum prices for PMBs and guideline pricing for non-PMBs.

A 'Fraud, Waste and Abuse' summit convened by the Council for Medical Schemes during 2019 saw the signing of a charter by various industry stakeholders who pledged to assist in combating fraud, waste and abuse, in line with set standards.

The introduction of the NHI Bill courted controversy from many quarters on the funding of the system; quality of care under the NHI; and, the future of medical aid schemes. Responding to concerns around the timing for submissions to the Bill, government extended the due date to the 29 November. Input from GMG was included into the SAPPF submission.

Coding issues continue to be the greatest challenge in private practice administration and schemes continue to profile members using various mathematical models. GMG will carry on its efforts to assist members in this regard by providing coding education and awareness. To avoid unnecessary targeting by medical schemes, members are urged to make use of the coding manual and to contact Healthman for any coding related issues.

I would like to wish you all a happy, prosperous and safe 2020.

Dr Conrad Mashiloane
Chairman

GEMS to fund non-invasive Prenatal Testing

Tariff increases:

- ◇ Discovery Health
- ◇ Polmed
- ◇ GEMS

Medscheme/GMG Peer Review SLA

Changes to GEMS benefit options

Polmed announces day clinic procedures

INVITATION



GMG will be hosting a Business Workshop at the SASOG

2020 Congress on 8 March in the Drakensberg. The Workshop will be followed by an AGM.

Further details will be published in the Congress program which will be available shortly.

Don't miss what promises to be a valuable and informative event.

GEMS TO FUND NON-INVASIVE PRENATAL TESTING

GEMS has announced that as from 2020 they will fund **non-invasive prenatal testing** (subject to pre-authorisation), based on any of the following criteria:

- ◇ Advanced Maternal age
- ◇ Ultrasound Anomalies
- ◇ History of Chromosomal Abnormalities
- ◇ High Risk Serum Screen

GMG welcomes this development and is in the process of engaging with Dr Lou Pistorius of the Fetal Medicine Foundation to make recommendations to GEMS, on GMG’s behalf, on issues of clarity around these criteria. Members will be kept up to date with developments in this regard.

CHANGES TO GEMS BENEFIT OPTIONS



TANZANITE OPTION

GEMS has announced a new option, Tanzanite, which will replace their Sapphire option. This option will provide access to a network of

healthcare providers through a GP who will coordinate the healthcare needs of the member. Members of the Tanzanite option will have access to private hospitals, subject to utilizing the GEMS private hospital network.

GEMS Emerald Value option has announced new network contracts with hospital groups as from 2020. Life Healthcare Group has lost this contract in favour of other hospital groups. The current contracts are on a three-year basis.

CHANGES TO THE GEMS EMERALD VALUE OPTION

The GEMS Emerald Value option forms part of the (REO) Network which is made up of general practitioners (GP), dental providers, specialists, renal dialysis providers, document-based care providers and pharmacies who have agreed to charge the contracted rate and follow GEMS Network and managed care rules. The Emerald Value option also has a hospital network.

Patients on GEMS EVO options must obtain a referral from their nominated GP before consulting a specialist to avoid paying out-of-pocket. Network GPs and specialists have agreed to charge contracted rates so that patients will not have to pay any out-of-pocket expenses for their consultations. Patients may contact a non-nominated GP for emergencies.

MEDSCHEME/GMG PEER REVIEW SLA



Medscheme and SASOG/GMG have been in discussion regarding a SLA for Peer Review. This process would involve SASOG/GMG assisting Medscheme where it has concerns of overservicing and poor professional conduct on the part of the Obstetrician. This would only apply where the Obstetrician offers consent and is a member of SASOG/GMG.

Medscheme has committed to raising coding and billing errors with GMG, while clinical related issues would fall under the mandate of SASOG.

POLMED ANNOUNCES DAY CLINIC PROCEDURES



Polmed has released a list of procedures that should be done at Day Clinics for 2020. GMG has not been afforded the opportunity by Polmed to review and endorse this Day Clinic protocol. GMG will engage with Polmed to request further details. Members who experience problems in this regard should contact GMG via the Healthman offices.



UPDATE ON THE CMS SECTION 59 INVESTIGATION

Following allegations made by medical practitioners of unfair treatment and racial profiling by medical schemes, the Council for Medical Schemes established an investigation panel, led by Advocate Tembeka Ngcukaitobi (SC) to make recommendations on appropriate administrative, legal and policy interventions.

It is reported that 163 submissions were received by the Investigation Panel. Hearings were held during the last quarter of 2019 for stakeholders to make verbal input. The last tranche of hearings will take place early in 2020. The first session will take place from 20-24 Jan and the second, from 27-31 Jan. Medical Schemes and Administrators will be given an opportunity to make presentations to the Panel during this period.

Following the hearings, the Panel will prepare a provisional report which will be sent out to the parties that participated for review for clarity and correction. The final report will be presented at the CMS FWA Summit scheduled to take place on 2 April 2020.



Discovery Health has reported an average increase of 5.4% in utilisation by healthcare professional services between 2014 – 2019.



REMINDER

Please remember that network specialists agree to bill the contracted rate and not to balance-bill members. This payment arrangement is applicable to both PMB and non-PMB conditions.

Network specialists benefit from agreed-to enhanced in- and out-of-hospital reimbursement rates.

TARIFF INCREASES FOR 2020



DH has announced a 4.8% increase in tariffs for consultations and procedures.



Polmed has announced an increase of 3.5% for their specialist network rates



CODES 2614/2615

GEMS has recognised the increase in medical malpractice insurance fees and will continue to reimburse participating specialists an additional, enhanced fee for tariff codes 2614 and 2615. The rate for these codes will be R9 135.10 for network specialists. This enhanced fee is applicable to all the GEMS options. The rate for non-network specialists will be R4 753.81.

CODES 0190; 0191; 0192 and 0193

GEMS will increase its professional fees by 7.3% for out of hospital consultation tariff codes 0190; 0191; 0192 and 0193, and 5.3% increase for all other tariff codes **for network specialists**. The increase for non-network specialists will be 4.5% on all tariffs.

GENERAL INCREASES

Reimbursement for tariffs for the GEMS network for in and out of hospital will be paid at 130% of scheme rate for all GEMS options (this includes Sapphire and Beryl options that were previously reimbursed at 100% of scheme rate).

IMPORTANT ANNOUNCEMENT!



THE SAMA 2020 MEDICAL DOCTORS CODING MANUAL (MDCM)
IS NOW AVAILABLE.

Click here for more