

Screening & preventative care

Nonkqubela Mxoli
Ambulatory Benefits Manager
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Topics

03



01 Background on GEMS

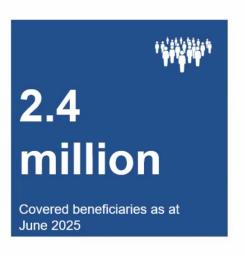
O2 Screening & preventative care benefits offering

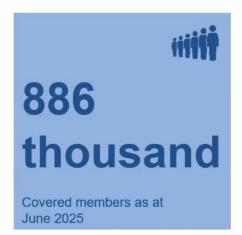
Value-based care

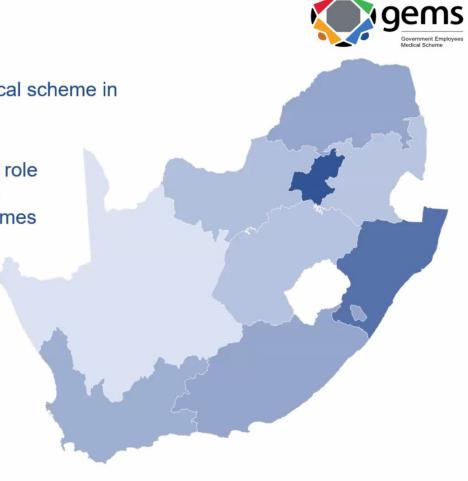
Overview of GEMS

GEMS is the **largest restricted** & second largest overall medical scheme in South Africa, with **voluntary membership** for public servants

Covering over 25% of all beneficiaries nationally, it plays a key role in advancing access, affordability, & equity in healthcare, while leveraging its scale for cost efficiency & improved health outcomes

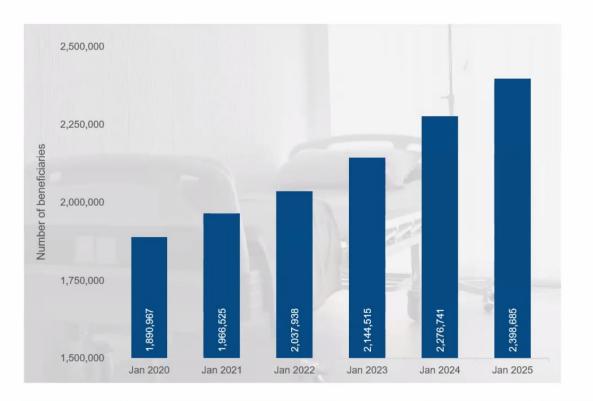






Extending access to healthcare coverage



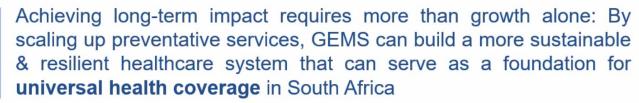


- Despite challenging economic conditions, GEMS has achieved rapid growth by extending medical cover to previously uncovered lives
- Over **500 000 lives** have been added in the past 5 years, supported by sustainable funding
- The Scheme now facilitates around 120,000 hospital admissions & 2 million doctor consultations annually, highlighting its expanding role in delivering healthcare access at scale

Driving growth through preventative care



GEMS has driven strong growth by embedding preventative care, such as routine screenings & early intervention programmes, into its **value proposition**, ensuring members receive quality healthcare access at an affordable cost



To realise this goal, **preventative care** must take centre stage – shifting the focus from procedure volumes to outcome-focused metrics, such as screening uptake & avoidable hospitalisations

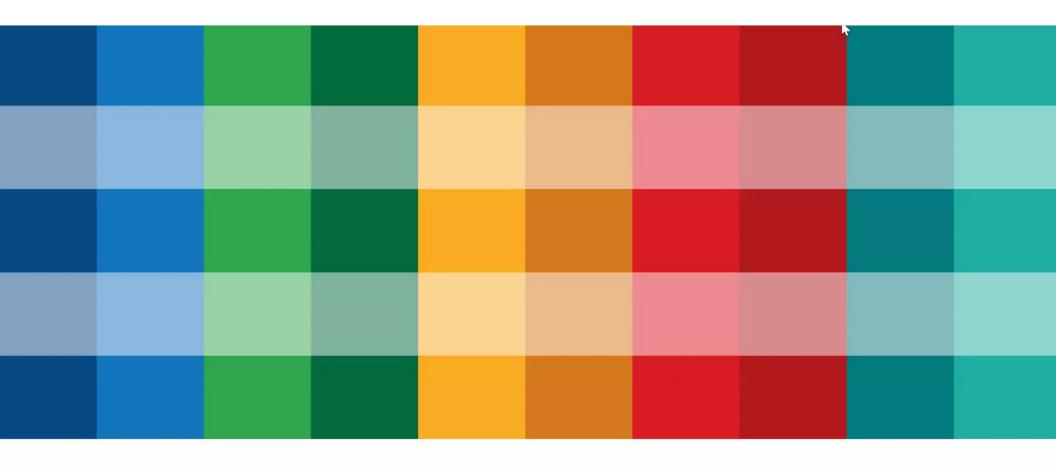


BUSINESS MAVERICK

PERSONAL FINANCE

Medical scheme contribution increases are announced – and it's not good news





Screening & preventative care benefits offering



GEMS benefits offering



GEMS offers one of the most **comprehensive**, **market-leading** screening & preventative care packages in South Africa

Available on all options & **paid from risk benefits** – that way, day-to-day benefits are not impacted

Services are designed to **detect disease early**, guide timely intervention & **keep members healthier** for longer



GEMS benefits offering





Cardiometabolic

- · Cholesterol screening
- · Glucose screening
- · Blood pressure monitoring
- Peak flow measurement



Newborn & paediatric

- · Neonatal hypothyroidism
- · Childhood hearing screening for children
- · Childhood optometry screening



Bone health

· Osteoporosis screening: Bone densitometry scan



Infectious disease

- · HIV/AIDS pre-test counselling & testing
- · Syphilis screening
- · Chlamydia & gonorrhea screening
- TB screening



Cancer

-

- Pap smear screening
- · Mammography screening
- · Prostate screening
- Faecal occult blood test



Specialty assessment

- Pregnancy screening
- · Glaucoma screening
- · Urine analysis



Vaccination

- Influenza vaccination
- Pneumococcal vaccination
- HPV vaccination
- COVID-19 vaccination

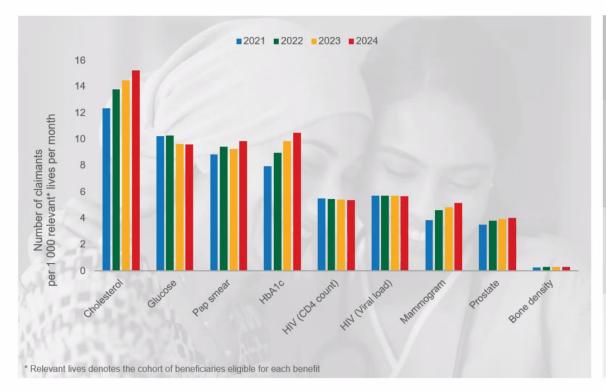


Dental

- Dental sealants
- Dental polishings



Number of claimants per 1 000 relevant* lives per month



Cholesterol screening uptake has risen by 5% annually from 2021 to 2024, yet still reaches only 1.5% of beneficiaries each month

Pap smears have increased from around 8.8 to 9.9 claimants per 1 000 relevant lives, while **mammograms** from 3.8 to 5.2 – yet less than 2% of eligible women are screened monthly

Even **standard checks** like HbA1c show modest gains while still reaching under 2% of the adult population each month

More specialised tests such as **bone density scans** & **prostate screening** remain relatively low, despite rising marginally



Number of claimants per 1,000 relevant* lives per month

To translate these improvements into meaningful population health gains, we need **stronger collaboration with doctors** to promote the value of routine screening, **simplify referral pathways** & **embed preventative checks** into every patient encounter





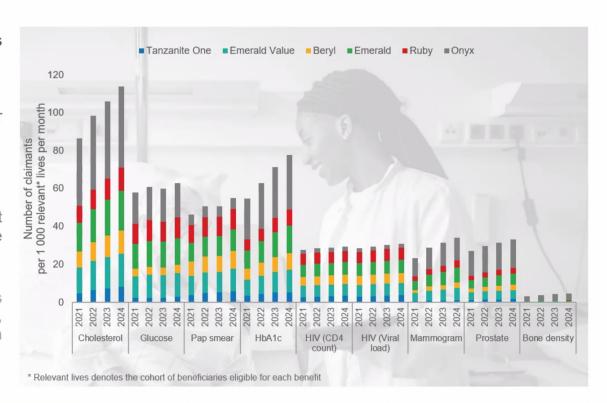
Number of claimants per 1 000 relevant* lives per month: Option level

All screening & preventative benefits are identical across all GEMS options, yet utilisation rates vary markedly

Onyx members consistently lead in uptake, especially for high-value tests like cholesterol, glucose and HbA1c

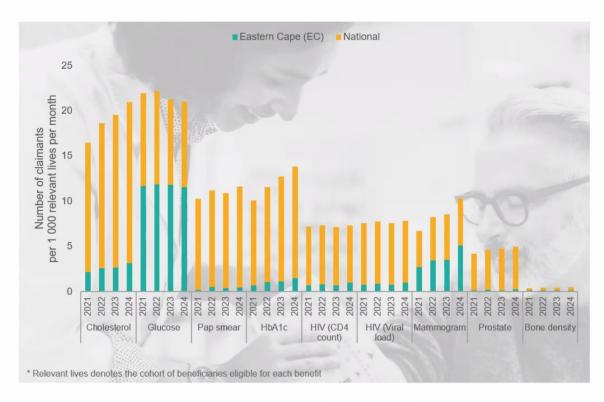
Tanzanite One & Beryl show progressively lower claimant rates per 1,000 relevant lives, despite having the same covered benefits

The largest gaps appear for critical, age-based screenings such as Pap smears, mammograms & osteoporosis scans, where lower-tier options reach less than half the utilisation of top-tier ones





Number of claimants per 1 000 relevant* lives per month: EC vs National

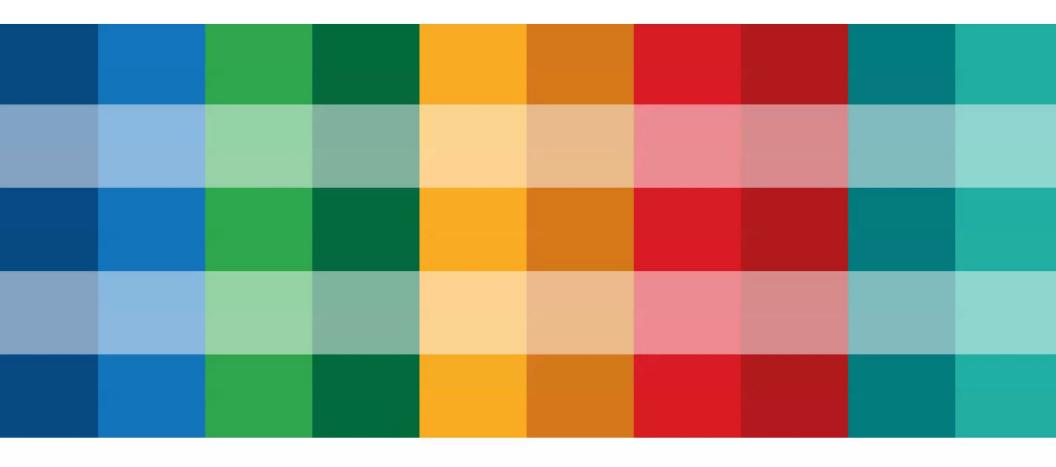


EC rates consistently lag behind the national average across all key screenings & preventative benefits, excluding glucose

Cholesterol uptake in EC rose from 2.2 in 2021 to 3.1 in 2024, contrasted with 14.3 to 17.8 nationally, highlighting a significant gap

Pap smears, HbA1c & HIV in EC remain under 1.5 per 1 000 relevant lives each month

For **mammograms**, the EC saw a higher increase from 2021 to 2024 relative to the national rate



Value-based care



Value-based care





Value is determined by the quality of care & the cost to achieve it

Optimal value is achieved when patient outcomes & experiences are maximised, while costs are minimised

In a value-based reimbursement model, payments are **linked to the value delivered**, not just the volume of services provided

Contracting for value



Working towards a healthier you

GEMS has implemented a multitude of value-based care models which wherever possible champion primary & preventative care over curative & hospi-centric care



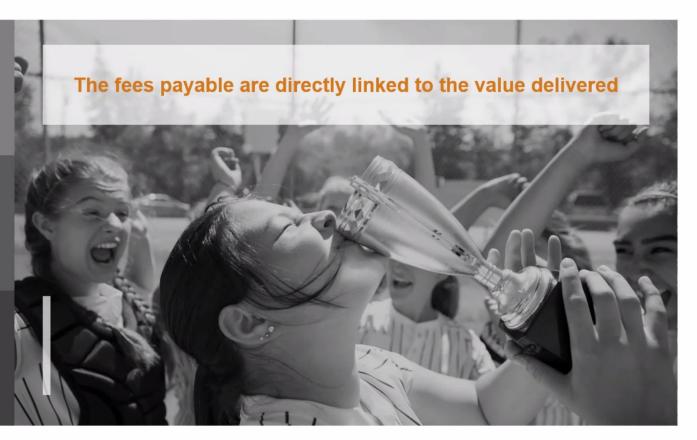
Population Medicine Initiative



The multidisciplinary care team is reimbursed through risk-based global capitation fees.

The capitation fees are linked to downstream cost savings. Greater downstream cost savings translate into higher fees.

The capitation fees are linked to process and surrogate outcome quality metrics. Improved quality metrics translate into higher fees.



Population Medicine Initiative



Same enhanced benefits across all options

The Scheme provides funding for unlimited consultations with the multidisciplinary care team.

The potential for benefit shortfalls and by implication out-of-pocket payments is negated.

Integration with GEMS wellness days – bringing care to members

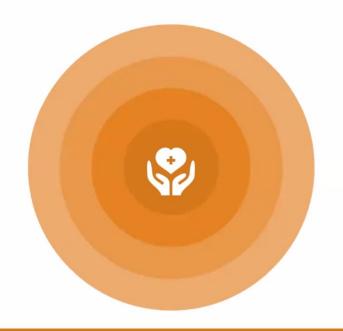
Population Medicine Initiative

A broad spectrum of process, surrogate outcome & cost measures are considered





Hospital admission rates, hospital readmission rates, hospital bed days & PQI admissions





Screening such as HIV tests, glucose tests, cholesterol tests, mammograms & so forth

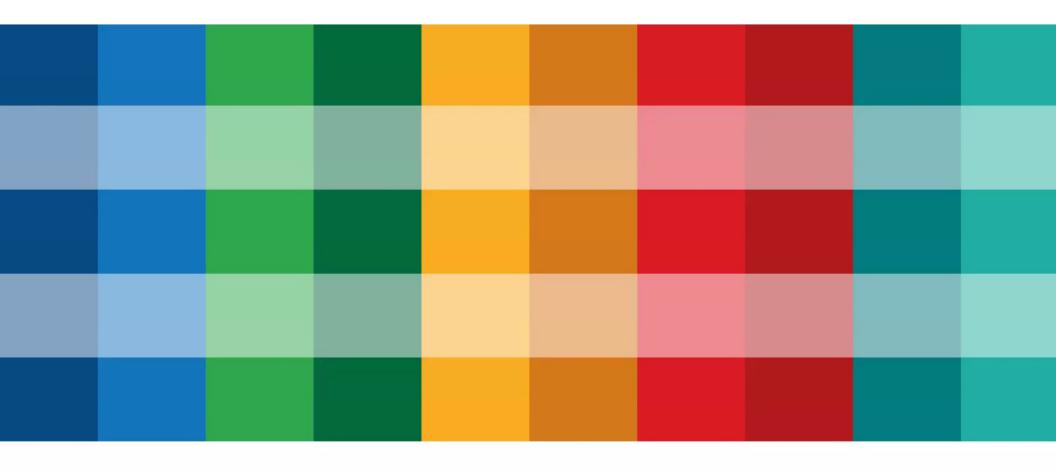


Preventative care such as influenza vaccines, pneumococcal vaccines & HPV vaccines



Chronic disease management (diabetes, HIV, hyperlipidaemia, hypertension, hypothyroidism & ischaemic heart disease)

GEMS has developed benefit structures that support value-based care and the delivery of cost-effective, high-quality services. These frameworks enable providers to make routine screening and preventative services a seamless part of each patient interaction, while aligning financial incentives with early detection and better patient outcomes.



Thank you

