



AGM Action List

GEMS AGM ACTION LIST

No.	Issue (short description)	Classification of Issue	Responsible Lead	Scheme Response / Action Required	Progress	Status
1.	Members requested the Scheme to limit the number of Board meetings to the extent necessary, as they deemed the 42 Board and committee meetings during the 2022 financial year to be somewhat excessive, a waste of Scheme/Member funds and not in the best interest of GEMS and its members, given that the Board's role to provide strategic direction, oversee the strategic plan and manage risk, and not to be involved in the day-to-day management of the Scheme.	Governance	CSLC	During the 2023 GEMS AGM, the Chairperson of the Board of Trustees responded that the Scheme was currently trying to insource capabilities that were currently outsourced to service providers, and as GEMS is a very complex environment, it needed all parties involved to forge heads to be able to have these types of discussions. Therefore, for now unfortunately, the Board would be having many meetings to insource capabilities, and once the services have been insourced, the number of Board meetings would decrease. In compliance with good governance practices, the Scheme should limit the number of Board and committee meetings to the extent necessary.	Given the complexity of the insourcing project, the Board will be meeting more than usual, but only to the extent necessary, to ensure proper oversight and implementation of the project. Kindly refer to the GEMS Annual Integrated Report for the years ending 2022 and 2023 for a complete breakdown of the Scheme's Board and Committee meetings.	In progress
2.	Members requested the Scheme to review the optical benefit to allow beneficiaries to keep their old frames, thereby saving their optical benefit, and allow such saving to be redirected to, e.g. antiglare glasses.	Product Development & Benefit Design	CRO	During the 2023 GEMS AGM, the Chief Research Officer responded that spectacle benefits have a sub-limit for frames and a sub-limit for lenses, the reason being that ideally, the Scheme would want members to use most of their benefits to improve sight, not for cosmetic purposes. The suggestion made by members, however, made sense, i.e. why Members cannot use the frame benefit to improve the quality of their lenses. The members noted that this aspect would be considered during Product Development in 2024, for implementation in 2025.	This matter was considered during the 2023 and 2024 Product Development processes, during which it was found that the available spectacle limits largely accommodate clinically necessary lenses and that the provision of such a benefit would cost the Scheme more than R100 million per year, which is excessive in the context of the current economic climate. However, this matter will also be presented to the 2024 Benefit Design Committee for consideration and recommendation to the relevant Committees and the Board. It is important to note that benefit shortfalls are monitored, considered and addressed by the Scheme through benefit enhancements on an ongoing basis.	In progress

3.	Members requested the Scheme to develop and distribute an article to members on "How to adequately use one's medical aid."	Member Communication/ Education	СМО	At the 2023 GEMS AGM, the Chairperson of the Board of Trustees thanked the members for this input and indicated that the Scheme would look into the possibility of developing and distributing the requested article. Develop and distribute an article to members on "How to adequately use one's medical aid." or the like.	The Scheme conducts ongoing member education on how best to use one's medical aid via: GEMS News; G-Health magazine; Social media platforms; and GEMS Day events.	Finalised
4.	Members requested the Scheme to consider introducing a landline number that is linked to the 0861 Call Centre number, as this would benefit members who make use of a Telkom landline, especially as Telkom excludes the 0861 numbers. Also, members phoning from their cell phones incur tremendous costs when phoning the Call Centre on the 0861 number.	Call Centre	CAO	The Scheme responded that it has dealt with the issue of the 0861 Call Centre number in the past, but will again investigate the impact of the 0861 Call Centre number on members calling from a Telkom landline or from their cell phones.	The Scheme concluded its investigation into the viability of introducing a toll-free call centre number. A memo in this regard was presented to the Principal Officer and his comments are being addressed. In addition, a business case was developed and logged with the Project Management Office (PMO) for consideration. The implementation of the toll-free call centre number is envisaged to commence in September 2024.	In progress

5.	Members requested the Scheme's compliance with the 24–48-hour turnaround time for member complaints/queries to be addressed, and to call members should such compliance not be possible, as stated in the automated response received by members upon submitting complaints/ queries to the Scheme.	Quality and Standard of Member Services	CAO / CMO	The Scheme responded that it was committed to serving its members and that it will use its best endeavours to ensure compliance with the wording of its automated response(s).	Complaints received via one of the Scheme's complaint channels, e.g. Complaints@gems. gov.za, are managed by means of the Scheme's complaints management system. Automated acknowledgement of receipts, indicating the applicable turnaround times (TATs) in the complaints space, are sent to complainants on receipt. This complaints management system tracks the TATs to ensure responses to complaints within the TATs. All complaints are managed within this complaints management system to ensure none gets lost and proper	In progress
					record of all complaints are kept. Insofar as member queries are concerned: During December 2022, the enquiries turnaround time was revised from 48 hours to 72 hours. However, the Scheme will implement a call-back service in the event of the 72-hour turnaround time not being met. Some of the contracts between the Scheme and its Service Provider Network ("SPN") were revised to include service levels for the timeous management and resolution of member queries. The Scheme will introduce an inter-SPN Standard Operating Procedure ("SOP") to ensure strict compliance with query-resolution turnaround times. The Scheme will implement an enhanced query tracking process, which will improve service and query management.	
6.	Members requested the Scheme to implement a system to properly track the receipt and resolution of member complaints/queries in order to ensure that all complaints/queries are finalised in good time.	Quality and Standard of Member Services	CAO / CMO	The Scheme responded that it was committed to serving its members and that it will use its best endeavours to ensure that member complaints/queries are resolved in good time.	Kindly refer to Issue No. 5 above.	In progress

7.	Members requested the Scheme to develop and implement mechanisms to fund original medication (instead of generic medication), as original medication tends to be more effective, although more expensive.	Medicine Management & Formularies	СНО	The Scheme responded that generic medication has the same bioavailability as the originator, and that SAHPRA would not register generic medication if the bioavailability was dissimilar. Members do have the option of opting for the original preparations. These will be funded by the Scheme, subject to the Scheme rules. It is important to note, however, that opting for original preparations, where there are less costly generic substitutions, will cause members to experience co-payments.	Kindly refer to the adjacent column to the left hereof.	Finalised
8.	Members requested the Scheme to consider deleting the beneficiary limit and to only retain the family limit applicable to some benefits, as this would empower Principal Members to better manage their, and their dependants' healthcare funding needs insofar as the particular benefits are concerned.	Product Development & Benefit Design	CRO	The Scheme responded that when contributing to a medical aid, money is not saved for something, but a benefit is bought. Members are not allowed to use another beneficiary or family member's sublimit, as it was not money put in a kitty, but a benefit entitlement. Consider the viability of deleting the beneficiary limit and to only retain the family limit applicable to some benefits in order to empower Principal Members to better manage their and their dependants' healthcare funding needs insofar as the particular benefits are concerned.	The Scheme considered this proposal during the 2023 Product Development and Benefit Design process. The Product Development Committee decided against it because of its prohibitively high cost, which would lead to unsustainably high contribution increases and negatively impact the affordability of Scheme membership, especially for large families.	Finalised
9.	Members requested the Scheme to consider introducing a COVID-19 multivitamin benefit, which could assist members in strengthening their immune system against the virus.	Product Development & Benefit Design	CRO	The Scheme is investigating the feasibility of this proposal and will revert to members in due course.	The Scheme introduced a COVID-19 multivitamin benefit in terms of which eligible members could elect to receive a once-off five (5) months' supply of multivitamins to assist in strengthening their immune system.	Finalised

10.	Members requested the Scheme to investigate the possibility of restructuring benefits to be more specific to members and their dependants' healthcare needs, as this could assist in curbing early benefit exhaustion and members having to pay for benefits that they typically do not need.	Product Development & Benefit Design	CRO	Unfortunately, given the number of members on the Scheme, it would not be practically possible for the Scheme to come up with an ideal benefit package for every principal member on the Scheme. However, the Scheme's current benefit options provide members with a good variety of choice when having to choose one to suit their healthcare needs.	During the next Product Development and Benefit Design cycle, the Scheme will again revisit its benefit offering under each of its benefit options in an attempt to provide members with an enhanced benefit offering.	
11.	Members urged the Scheme to pursue the recovery of monies where people had unduly benefited, as part of the Scheme's forensic investigations into same.	Fraud / Forensic Investigation	PO CAE CSLC	The Scheme obtained legal advice on the process of reporting the implicated employees to law enforcement agencies for possible prosecution and recovery of monies.	The Scheme's request for assistance was assessed by the Special Investigating Unit (SIU), who formally indicated that they will not be able to assist with the investigation, but with the convening of meetings in their capacity as the convenor of the Health Sector Anti-Corruption Forum. The Scheme's lawyers were given instructions to proceed with civil recoveries against the implicated employees, which matters are still being progressed in the High Court.	In progress