



Real Time Monitoring of Schemes – Help File

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Introduction

The Council for Medical Schemes (CMS) utilizes the Real Time Monitoring (RTM) system to collect data from medical schemes on a monthly basis. The project is called Real time monitoring (RTM). The data collected should represent the schemes' current financial information. Data collected is only useful if the time period during which it is collected is meaningful. The CMS will be collecting the data at the end of the fourth week of every month in respect of the previous month. The data collected will only be utilised for internal monitoring as it is unaudited.

Technology

Web services will be utilised to collect the indicators from schemes. Web service is an application programming interface that can be accessed over a network, such as the Internet, and be executed on a remote system hosting the requested services (CMS).

The web service technology was decided upon as all schemes do not utilise the same architecture for their systems. Web services are designed to support interoperable interaction over a network.

CMS requires schemes to consume the web service, mapping directly to the financial system or data warehouse used by the scheme and do the passing of the required indicators automatically.

All single indicators required

- Scheme reference number
- Members
- Beneficiaries
- Average age
- Pensioner ratio
- Gross contributions
- Savings contributions
- Net claims incurred in respect of risk carried by the scheme (including claims incurred in respect of commercial reinsurance contracts)
- Net claims incurred in respect of related risk transfer arrangements (excluding claims incurred in respect of commercial reinsurance contracts)
- Net Claims: Accredited managed healthcare services (no transfer of risk) Administration expenditure
- Broker fees
- Net impairment losses: trade and other receivables
- Net (income) or expense on commercial reinsurance contracts
- Net (deficit) or surplus
- Current assets

- Current liabilities
- Total member funds
- Unrealised non-distributable reserves (revaluation reserves)
- Funds set aside for specific purpose
- Cumulative net gains
- Encumbered assets
- Subordinated loans
- Submission ID indicating draft or final submission
- The month the data is being submitted for
- The year the data is being submitted for
- Email address/es

A total of 27 indicators will be submitted by schemes

Please refer to **Annexure A** for more information on each indicator to be submitted.

Schemes should note that an indicator, iEmailAddress, is for RTM users to supply, at least, one email address to which a detailed report per submission will be emailed. For a draft submission, all information for the current submission will be displayed in this report. For a final submission, the current final submission together with all previous months' final (locked) submissions for that calendar year will be displayed.

Please refer to **Annexure B** for a results report which will be displayed on the screen once the scheme has made a submission. When the scheme has made its first submission for a period, it should submit indicator iSubmission ID as '0' for a draft submission. Once the scheme receives results report per Annexure B below and the results are correct the scheme can proceed to do a final submission by changing indicator iSubmission ID to '1' for a final submission. The submission will then be locked. Schemes should note that a 'final' submission should be made per the RTM deadlines communicated via Circular. A draft submission by any scheme will not be accepted as a final submission.

Please refer to **Annexure C** for a list of all schemes and their reference numbers.

Submission process

Submission dates:

Submission dates will be published via Circular each year. Schemes are required to ensure that they plan accordingly to ensure timely submissions.

Backdated corrections:

Schemes can request the CMS to unlock previous submissions in order to make corrections, but this will be limited to one year back from date of last submission. For example, a request for correction on a September 2022 submission can only be requested before the October 2023 RTM submission deadline.

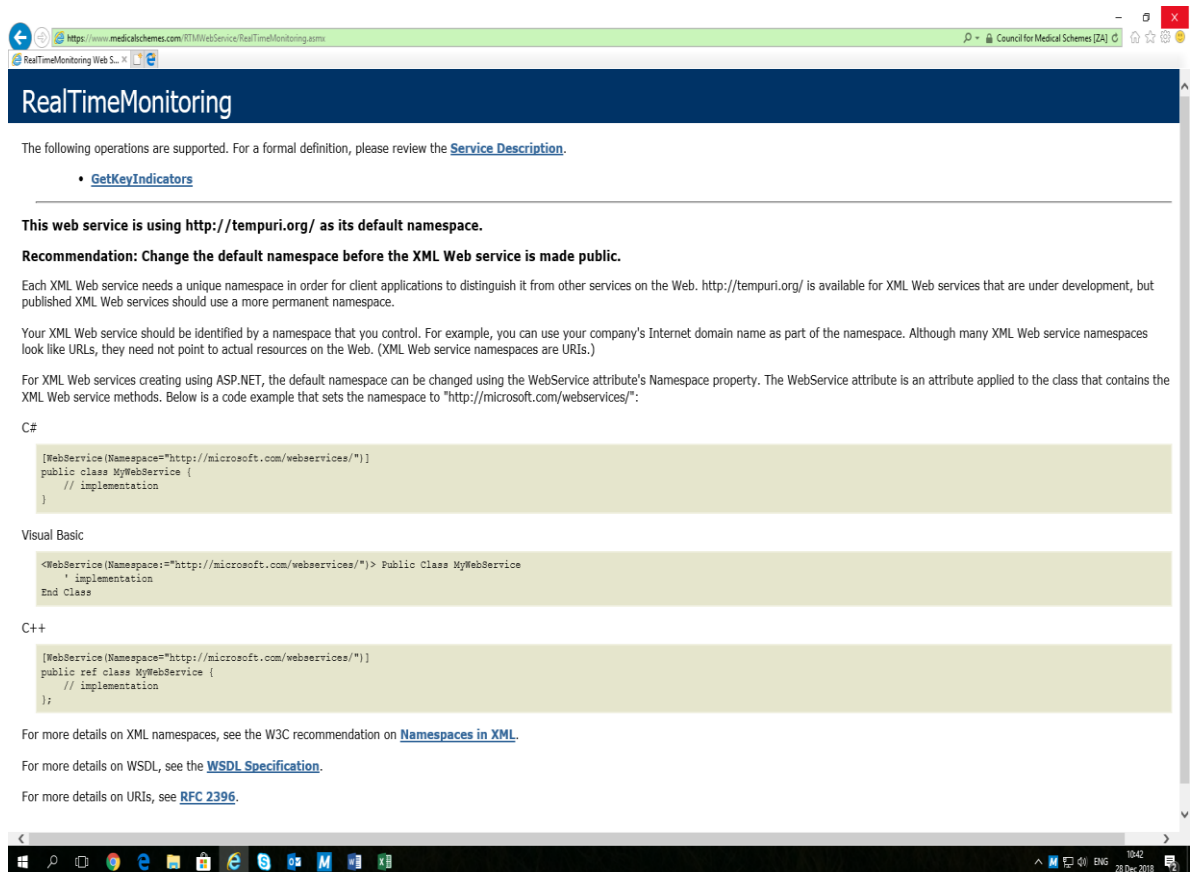
The CMS will from time to time also request schemes to make corrections based on errors identified during the analysis of RTM data submitted.

Retrieving the wsdl file

The web service resides at:

<https://www.medicalschemes.com/RTMWebService/RealTimeMonitoring.asmx>, the wsdl file can be retrieved using the above address.

- Copy and paste the above address in your web browser.
- You will be presented with the screen below:



- Click on *Service description* and save the page you get as "RealTimeMonitoring.wsdl".
- You will be able to consume the web service using this file.
- The web service has one method called *GetKeyIndicators*, which accepts the indicators.

User name and password

Please contact Henry Eybers per email H.eybers@medicalschemes.co.za for your scheme's username and password.

Annexure A – Indicators

Indicator name	Type	Description	Corresponding value per Quarterly Returns	Time period to submit	Validations
iSchemeRefNo	Integer	Scheme Reference Number: This is the registration number of the scheme as listed in the government gazette. This can be obtained from Annexure B to this document.			Numeric
iMembers	Integer	Members: The sum total of members.	Line 2.1.2 (members column)	At the end of the relevant month	Values must be greater than 0 AND less than iBeneficiaries indicator
iBeneficiaries	Integer	Beneficiaries: The sum total of members and dependants (adult & child dependants). This includes suspended beneficiaries.	Line 2.1.2 (beneficiaries column)	At the end of the relevant month	Values must be greater than 0
iAverageAge	Decimal (18.2)	Average age: This should be computed per beneficiary based on age as at 01 January of the financial year concerned.	Part 2.2: Average age per beneficiary for the scheme	At the end of the relevant month	Values must be between 1 and 100
iPensionerRatio	Decimal (18.2)	Pensioner ratio: Beneficiaries older than 65 years of age as a percentage of total beneficiaries based on their age as at 01 January. Scheme should capture the data in a numerical format, and not as a percentage format.	Part 2.2: 65 years+ ratio for the scheme	At the end of the relevant month	Values must be between 0 and 100
iGrossContributions	Decimal (18.2)	Gross contributions: Amounts payable by members and/or employers, in terms of the rules of the medical scheme for the purchase of healthcare benefits. Gross contributions include savings plan. Net contributions are gross contributions net of savings.	Line 4.1.1 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Values must be greater than 0
iSavingsContribution	Decimal (18.2)	Savings contributions: Savings contributions collected from members as part of their gross contributions and allocated to the members' personal medical savings accounts.	Line 4.1.2 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Values may be 0 or greater than 0
iNetClaimsIncurred	Decimal (18.2)	Net claims incurred in respect of risk carried by the scheme (including claims incurred in	Line 3.10.11 YTD (excluding Line 3.10.4.4)	Must be for the period ending at the end of the	Values must be greater than 0

Indicator name	Type	Description	Corresponding value per Quarterly Returns	Time period to submit	Validations
		respect of commercial reinsurance contracts). It is important to note that all the claims expenditure lines are entered as positive figures.		relevant month. This represents the year-to-date figure.	
iNetClaimsIncurredRTA	Decimal (18.2)	Net claims incurred in respect of related risk transfer arrangements (excluding claims incurred in respect of commercial reinsurance contracts):	Line 3.10.18 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Numeric
iNetClaimsIncurredManCare	Decimal (18.2)	Accredited managed healthcare services (no transfer of risk)	Line 3.10.4.4 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Numeric
iNetIncomeExpenseCommReIns Contract	Decimal (18.2)	Net (income) or expense on commercial reinsurance contracts: A surplus is entered as a negative figure, and a deficit as a positive figure.	Line 4.1.6 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Numeric
iAdministrationExpenditure	Decimal (18.2)	Administration expenditure: Represents costs incurred to administer a medical scheme, inclusive of marketing expenses.	Line 4.1.8 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Values must be greater than 0
iBrokerFees	Decimal (18.2)	Broker fees: The remuneration paid to brokers by a medical scheme in respect of the introduction of a member to a medical scheme by that broker and the provision of ongoing services or advice to that member. This includes distribution fees paid to brokers.	Line 4.1.7 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Values may be 0 or greater than 0
iNetImpairmentLossesTradeAndOtherReceivables	Decimal (18.2)	Net impairment losses: trade and other receivables: Trade and other receivables: losses recorded when the carrying value of an asset exceeds its recoverable amount. It is important to note that all the non-healthcare expenditure lines are entered as positive figures. Any recoveries or profits would	Line 4.1.9 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Numeric

Indicator name	Type	Description	Corresponding value per Quarterly Returns	Time period to submit	Validations
		therefore be entered as negative figures.			
iNetDeficitSurplu s	Decimal (18.2)	Net (deficit) or surplus: A surplus is entered as a positive figure, and a deficit as a negative figure.	Line 4.1.20 YTD	Must be for the period ending at the end of the relevant month. This represents the year-to-date figure.	Values may not be 0
iCurrentAssets	Decimal (18.2)	Current Assets: All assets of the scheme considered to be current.	Line 6.1.2	At the end of the relevant month	Values must be greater than 0
iCurrentLiabilitie s	Decimal (18.2)	Current liabilities: All liabilities of the scheme considered to be current.	Line 6.2.3	At the end of the relevant month	Values must be greater than 0
iTotalMemberFu nds	Decimal (18.2)	Total Member Funds: Total of all scheme reserves including Accumulated Funds.	Line 6.2.1	At the end of the relevant month	Values may not be 0
iUnrealisedNonD istRes	Decimal (18.2)	Unrealised non-distributable reserves: Unrealised gains are disclosed as positive figures, and losses as negative figures.	Lines 6.2.1.2 and 6.2.1.3	At the end of the relevant month	Numeric
iFundsSetAside	Decimal (18.2)	Funds set Aside: All funds set aside other than for the payment of future claims.	Line 6.2.1.4	At the end of the relevant month	Values may be 0 or greater than 0
iCumulativeNetG ains	Decimal (18.2)	Cumulative net gains: Unrealised gains are disclosed as positive figures, and losses as negative figures.	Line 9.1.7	At the end of the relevant month	Numeric
iEncumberedAss ets	Decimal (18.2)	Encumbered Assets: Where a specific asset is encumbered in respect of obligations between other persons (third party liability), there is a risk of loss to the scheme.	Line 9.2.5	At the end of the relevant month	Values must be 0 or greater
iSubordinatedLo ans	Decimal (18.2)	Subordinated loans: Debt which ranks after other debts if an entity falls into liquidation or bankruptcy.	Line 9.2.6	At the end of the relevant month	Values may be 0 or greater than 0
iSubmission ID	int	To indicate Draft (submission remains unlocked) or Final (submission is locked)			Either 0 (For Draft) or 1 (Final)
iMonthSubmittin gFor	int	The month number the data is being submitted for example 1 for January etc. The month the data is being submitted for is important and should never be 0.			Values must be greater than 0
IYearSubmitting For	int	The year for which you are submitting data.			Numeric
iEmailAddress	String Text	Email address to be supplied by users.			One address at a minimum with;

Indicator name	Type	Description	Corresponding value per Quarterly Returns	Time period to submit	Validations
					separating each. Each address to have @ sign in.

Please note: If any of the indicators do not apply to your scheme, please send through a 0.

Annexure B – Results report

Results	Type	Calculation
Dependant Ratio	Numeric (2 decimals)	= Dependants/ iMembers Dependants= iBeneficiaries - iMembers
Net Claims ratio	Percentage (65.0% with one decimal place)	= Net relevant healthcare expenditure incurred/ Net contributions <i>Net contributions</i> = iGrossContributions – iSavingsContribution <i>Net relevant healthcare expenditure</i> = iNetClaimsIncurred + iNetClaimsIncurredRTA+ iNetClaimsIncurredManCare
Net Healthcare Result	Numeric (only whole numbers - no decimals)	= Net Contributions – Net relevant healthcare expenditure - (iAdministrationExpenditure + iBrokerFees + iNetImpairmentLossesTradeAndOtherReceivables + iNetIncomeExpenseCommReInsContract)
Solvency ratio (Year to date)	Percentage (65.0% with one decimal place)	= Reserves (Total Net assets)/ Gross Annual Contributions <i>Reserves (Total Net assets)</i> = iTotalMemberFunds – iFundsSetAside – iEncumberedAssets – iSubordinatedLoans – Only if Sum of the following is positive (iUnrealisedNonDistRes + iCumulativeNetGains) <i>Gross annual contributions</i> = (iGrossContributions/ Number of months the data was collected for) * 12
Submission Type	Text	Draft Submission (Where Submission ID = 0) Final Submission (Where Submission ID = 1)

Annexure C – Scheme reference numbers

Ref No	Scheme Name
1005	AECI Medical Aid Society
1465	Alliance Midmed Medical Scheme
1012	Anglo Medical Scheme
1571	Anglovaal Group Medical Scheme
1279	Bankmed
1507	Barloworld Medical Scheme
1252	Bestmed Medical Scheme
1526	BMW Employees Medical Aid Society
1512	Bonitas Medical Fund
1237	BP Medical Aid Society
1590	Building & Construction Industry Medical Aid Fund
1034	Cape Medical Plan
1043	Chartered Accountants (SA) Medical Aid Fund (CAMAF)
1491	Compcare Wellness Medical Scheme
1068	De Beers Benefit Society
1125	Discovery Health Medical Scheme
1572	Engen Medical Benefit Fund
1202	Fedhealth Medical Scheme
1271	Fishing Industry Medical Scheme (Fish-Med)
1086	Foodmed Medical Scheme
1554	Genesis Medical Scheme
1253	Glencore Medical Scheme
1270	Golden Arrows Employees' Medical Benefit Fund
1598	Government Employees Medical Scheme (GEMS)
1566	Horizon Medical Scheme
1591	Impala Medical Plan
1559	Imperial and Motus Medical Aid
1087	Keyhealth
1145	LA-Health Medical Scheme
1197	Libcare Medical Scheme
1599	Lonmin Medical Scheme
1466	Makoti Medical Scheme
1547	Malcor Medical Scheme
1495	Massmart Health Plan
1039	MBmed Medical Aid Fund
1149	Medihelp
1506	Medimed Medical Scheme
1548	Medipos Medical Scheme
1140	Medshield Medical Scheme
1167	Momentum Medical Scheme
1600	Motohealth Care

Ref No	Scheme Name
1241	Multichoice Medical Aid Scheme
1584	Netcare Medical Scheme
1214	Old Mutual Staff Medical Aid Fund
1441	Parmed Medical Aid Scheme
1186	PG Group Medical Scheme
1563	Pick n Pay Medical Scheme
1583	Platinum Health
1194	Profmed
1201	Rand Water Medical Scheme
1430	Remedi Medical Aid Scheme
1176	Retail Medical Scheme
1013	Rhodes University Medical Scheme
1424	SABC Medical Aid Scheme
1038	Samwumed
1234	Sasolmed
1531	Sedmed
1568	Sisonke Health Medical Scheme
1486	Sizwe Hosmed Medical Fund
1209	South African Breweries Medical Scheme
1580	South African Police Service Medical Scheme (Polmed)
1464	Suremed Health
1578	TFG Medical Aid Scheme
1592	Thebemed
1544	Tiger Brands Medical Scheme
1582	Transmed Medical Fund
1579	Tsogo Sun Group Medical Scheme
1597	Umvuzo Health Medical Scheme
1520	University of Kwa-Zulu Natal Medical Scheme
1291	Witbank Coalfields Medical Aid Scheme
1293	Wooltru Healthcare Fund