

THE GAP



Volume 1, Autumn edition



INSIDER

BAISI MOSOANE-PAMBO on her journey to providing HEALTHCARE for those of LESSER MEANS

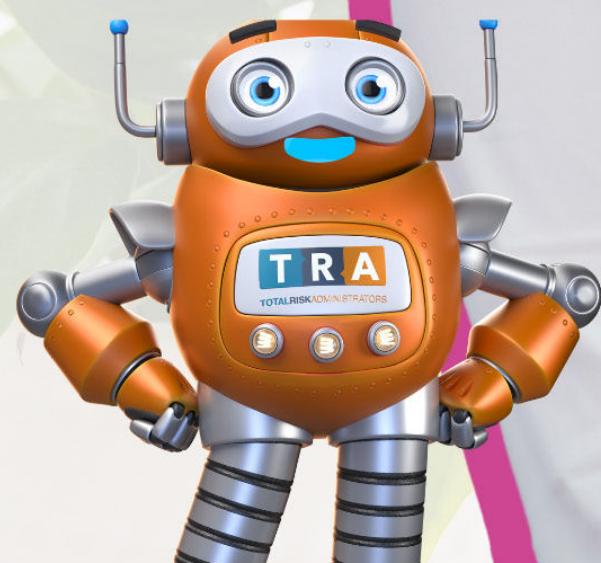
- Covid-19 - disturbing aftermath divides medical community - HAVE YOUR SAY!
- Fallopian cancer linked to breast and ovarian cancer

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Gap cover myths debunked •
To broker or to not - that is
the question.

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From the editor

Don't you just love it when someone displays the courage, self-belief and sheer dogged determination to identify a niche in the market, one that they are then able to turn into a vital, income-generating opportunity? I know I do.

And this was precisely the case with Baisi Mosoane-Pambo - our exclusive interview for this edition - who seized upon a striking gap in the market to facilitate a health service for people in her community who need it the most. Founder and owner of MSP Financial Services and Healthcare, Baisi (the first in our upcoming series that will shed light on some of South Africa's most respected brokers), tells us what led to the establishment of her business, designed to meet the needs of communities with little to no medical help previously available to them. Her story makes for an inspiring read.

As the long, summer days give way to the cooler months, looking after your health is paramount. We help you to do this with some winter wellness tips, while also exploring the effects of the pandemic and its long-term effects. Although now described as endemic, Covid-19 is still very much with us (three people we know of were recently hospitalised for it). Remaining vigilant and practicing good hygiene is still advisable as a means of prevention, but what if you already contracted the virus? Are you suffering from any long-term effects?

And what about the Covid-19 vaccine? Some are claiming that getting the vaccine is now having an adverse effect on their health. Is there any truth to this?

Our feature story explores the lingering effects of Covid-19, highlighting opposing views from the medical community on this controversial issue. Our interactive poll allows you to have YOUR say on the pandemic: Are you experiencing any residual symptoms from either being exposed to the virus, or as a result of the vaccine? Let us know! We want to hear about your personal experience.

Also, look out for exciting upcoming events and our Giveaway section.

Lastly, on a different note, if you enjoy reading true-life stories, check out my newly-released memoir - *Making Lemonade* - which documents a painful childhood journey and its aftermath. This story was not easy to write, but in the end, it proved cathartic. My hope is that the book provides other survivors with hope and inspiration that it's ultimately up to us, to not allow life's lemons to define us.

Stay safe.

Liana



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REAL, AFFORDABLE HEALTHCARE FOR THOSE OF LESSER MEANS IN THE SPOTLIGHT

BAISI MOSOANE-PAMBO ON HER ENTREPRENEURIAL JOURNEY TO MAKE
A DIFFERENCE By Liana Shaw

They say that necessity is the mother of invention. This was true of Baisi Mosoane-Pambo, who after graduating from the University of Bophuthatswana (now, North West University), with a B Com, eventually went on to establish her own company – MSP Financial Services and Healthcare.

Born and bred in Everton, in the Vaal, Baisi went on to work for a few prestigious organisations, among them, Sun International, Consumer Council of Bophuthatswana, Standard Bank Bophuthatswana, Sefalana Employee Benefits Organisation, Permanent Building Society and Medscheme. Having amassed experience in Banking, Pension/Provident Funds, Insurance and then Healthcare Funding and Administration, she decided to pursue her dream of becoming a CEO, heading up her own company, one that specifically focused on the healthcare needs of South Africa's previously disadvantaged population.

Tell us more about the events that led up to this important career junction, Baisi.

Back in those days, many black South Africans were not well informed of how Medical Aid or Insurance actually work, or of the important benefits they provide. This was mainly because there were only two types of brokers operating – Corporate Brokers, who were busy focusing on executives, and Individual Brokers, who were simply chasing new business for commission.

I recognised a massive gap between the two, which I decided I needed to fill. Luckily, thanks to the various positions I had occupied during the course of my career, I was well positioned to deal with all levels of employees within an organisation, from a tea lady/cleaner or gardener, to a white-collar worker or CEO.

Added to that, my nearby supermarket was experiencing a high staff turnover. After doing my research, I discovered that most of the ladies working there were either from a Township or Informal Settlement, and had therefore not been exposed to role models they could learn from and emulate. So, I took it upon myself to become their role model, by training them and developing them into becoming Financial Advisors.

As an industry leader, who has spent considerable time in healthcare, have you experienced much change in the industry over the last few years, and if so, how has the industry responded in terms of resilience and innovation?

Yes, there has been massive change. I remember, when I was the Bonitas Fund Manager, there was only one option available – the Standard option, which to this day, remains the traditional benefit option, and is still considered the flagship of Bonitas.

When Discovery Health was born and they introduced the Saving options, this saw most of our young, healthy members gravitating to Discovery. I realised we would need to move quickly to close the gap, which was when I introduced

our second option – Bonsave, accompanied by a level of savings (10%, 15%, 25%), to meet healthcare needs. The initiative was successful, helping to reduce the loss of young, healthy members. I also introduced the BonCap option, which focused on new entrants into healthcare funding, concentrating more on a managed care basis.

Medical schemes such as Telemed/Bestmed, Fedhealth or Momentum also began different Hybrid options, that changed how medical schemes were previously viewed. All offering Vested Saving, Vault or e-wallet, members were now able to control how they planned, utilised and paid their monthly contributions.

I must stress that the resilience and creativity of these schemes has definitely changed the way we view medical aid benefits, and were the main reason Discovery Health began thinking 'out of the box', coming up with the Vitality option.

What ignited your passion and decision to go into brokering, after such a long and successful career in managing medical schemes?

During my tenure with Medscheme, I did a presentation to Cobra Water Tap's employees, who had never belonged to a medical scheme. Some of the elderly staff called me aside, asking: "Since our families are based in rural KZN and EC, how will the doctors there know that the medical aid card has money? How will they claim, how will they know that the medical aid will pay for the procedure?" That made me realise that educating members is vital, but who would do it, if not me?

So, is this part of the service you now provide?

Very much so. The most important aspect to my business is that members understand how their medical aid scheme works, what is covered and what is excluded. They also require knowledge on waiting periods, pre-existing conditions, Late Joiner Penalties, ICD-codes and how they all impact on their membership.

I am happy to report that our members now know exactly how to use their medical aid, misuse has decreased, how to read their medical scheme statements and how to ask the right questions of their doctors, so they are not taken advantage of.

At MSP Consultants, we remain passionate about service, regularly visiting our clients and engaging with them, either one-to-one, or via group presentations.

When was MSP Consultants established and what lessons learnt during your earlier career were you able to take into your new business venture?

MSP Consultants was established 21 years ago, (4 April 2024 marks our birthday). It has not been easy. It took eight years for me to generate profit, (only R1 000 at that), but we all celebrated, after only breaking even for seven years.

As for lessons learnt, there were several: Constantly improve – continuous learning and improvement are essential. Remain curious, seek knowledge and refine your skills; Be adaptable and flexible – markets evolve, and successful businesses are the ones that can adapt. Be open to change, pivot when necessary and stay agile; Set your own Trends – Innovate and stay ahead of the curve. Refrain from following existing trends, create your own; Adopt a Customer-Centric approach – prioritise your customers. Understand their needs and strive to deliver exceptional experiences, alongside building lasting relationships. Satisfied customers are your best advocates; Create something of value and dream big – successful businesses thrive by offering products or services that meet real needs. Aim high, set ambitious goals and work diligently towards achieving them; Learn from your mistakes – failures are stepping stones to success. Embrace setbacks as learning opportunities. Analyse what went wrong, adapt and keep moving forward; Believe in yourself – confidence is crucial. Trust your abilities, persevere through challenges and maintain a growth mindset. Self-belief fuels resilience.

The medical scheme environment is highly complex. How can the schemes, as well as their brokers ensure members understand their scheme and benefit options?

I can relate to this. In the beginning, I barely understood them myself. I believe they should train their Client Liaison Officer, as well as their brokers. As a broker, you need to understand your client, their budget, as well as their healthcare needs, to be able to match them with the appropriate option.

Post-Covid, elective procedures have increased substantially. In your view, how should medical schemes be weathering the storm to protect the scheme's viability, keep member satisfaction in check, and most of all, ensure premium increases do not exceed headline inflation?

The impact on the reduction in claims experienced during Covid-19 coupled with a low-inflation environment, has allowed most South African medical schemes to defer their annual contribution increases for the past 24 months.

The medical aid industry has done well to weather the Covid-19 storm, reinventing itself with new offerings to the consumer. It remains an industry-imperative to continue to innovate in the coming years, to continue providing members with a service that is in line with ever-changing technology. Additionally, every effort needs to be made to simplify administration to accommodate and better serve its members and service providers.

It is interesting to note that schemes that were already financially constrained pre-pandemic, came under mounting pressure, with interventions needed to either amalgamate with other schemes, or liquidate.

How important are the services of a broker in this industry, and how are brokers being trained with respect to the above question?

In South Africa, the medical scheme business is a complicated one, with confusing wording and many different options for customers, which can leave them feeling bewildered. This is the primary reason why you should consider using the services of a reliable medical aid broker. They know everything there is to know about the many medical aid schemes by different service providers and how they work.

They are mandated to carry out in-depth risk analyses and health assessments on each client, to figure out which medical help options are best for them, given their specific requests and income.

And that's not where it ends. Even after signing up, a broker needs to engage with the client to explain any hard-to-understand medical aid terms, help them with difficult or rejected claims, and engage with the medical scheme on the member's behalf, where necessary. Plus, they need to keep their clients up to date on new rates, benefit changes and increases for the year ahead.

Remember, broker training is ongoing, as rules often change and option benefits are revised annually. Brokers are also mandated to attend workshops to attain Continuing Professional Development, in order for them to be fully compliant.

Can you share some key business initiatives you are implementing in your brokerage to ensure your members receive a member-centric service from the scheme?

We are encouraging our members to utilise the new technology their schemes have introduced, so as to be able to check on the progress of claims, status and benefits the different schemes offer.

Do you offer a value-add service?

Yes, we have a number:

- We have created a WhatsApp group service for our members. Why? Because most of the time, they are unable to call the schemes directly, due to airtime and the long wait-on-line process. For those without WhatsApp, (pensioners etc.), we have an SMS group.
- We always strive for our members to not speak to different agents, thereby having to repeat their story.
- We register all chronic conditions, thereby shortening turnaround time.
- We send chronic forms, or any other documents, via WhatsApp, should they not be privy to an email or fax. All they need to do is take a photo and send it to us.
- Our Customer Relationship Management System can track overage dependents and chronic renewals, thereby helping to remind our members.
- We acknowledge their birthdays, anniversaries and the like.

- We sell up for other affiliated products, such as Gap Cover.

What do you believe lies in store for your members over the next two years by way of initiatives, developments, and membership benefits in the medical scheme industry?

Every year, medical schemes increase their contributions while decreasing benefits. In 2024, we are seeing improvements on preventative care benefits, that require members to undertake regular healthcare screenings.

But, with the current uncertainty and government election in May, it becomes impossible to determine future outcomes. Which also brings us to the NHI Bill, which has been approved but not yet signed into law.

Reflecting on the NHI, how might this reshape the private health sector, in your view?

I do not view the NHI as a threat, but, first government must improve their healthcare facilities by way of functioning and the current long queues for operations and procedures.

Let us not forget that pilot studies were implemented, but failed drastically due to manpower and funding. How the NHI will be funded remains unanswered. The government also needs to do more with respect to engaging with the private health sector.

In terms of the NHI, what strategies do you believe the healthcare sector should be considering to collectively safeguard and enhance their current offering, especially for those who cannot afford the high costs of private healthcare?

I believe the private sector can support the NHI via the following:

- Private health providers could contribute to different minimum packages within the NHI framework, such as: optometry, pharmaceutical services, preventative screening and the like.
- Private health can play a role in providing access to quality healthcare through family practitioners acting as gatekeepers within the NHI system.
- The private sector could contribute to the NHI by offering different benefits, infrastructure and expertise, to enhance healthcare services.
- Medical aid schemes together with medical insurance, could tailor-make options that will provide for limited benefits. Should members need more, they could be adjusted on a fee basis.

How do you anticipate the healthcare industry, particularly the funder industry, will adapt to the increasing demand for a market shift in the way they contract with service providers, increase utilisation for digitisation of health and new technological solutions?

A recent study revealed that the adoption of digital technologies, such as SMS-based solutions, mobile health applications, telemedicine, WhatsApp based systems, artificial intelligence and robotics, provided a valuable communication platform during the pandemic.

“Government must improve their healthcare facilities and address the current long queues for operations and procedures.”

This is the way the world is moving, however, these smart digital health technologies face several impediments such as infrastructural and technological barriers, organisation and financial barriers, policy and regulatory barriers, as well as cultural barriers. For our specific market, we have established an increasing number of community networks in rural areas to bridge the digital divide.

In terms of gap cover, do you have a view on how this service should complement scheme benefit design?

Gap cover is important in that it contributes to a more comprehensive and effective risk management strategy. While medical aids typically cover 100%-200% of the medical aid tariff, specialists often charge more than 400%. Coupled with co-payments and penalties, this could result in shortfalls running into tens of thousands.

This is where gap cover is crucial. It acts as a vital safety net, mitigating the financial risks associated with potential shortfalls.

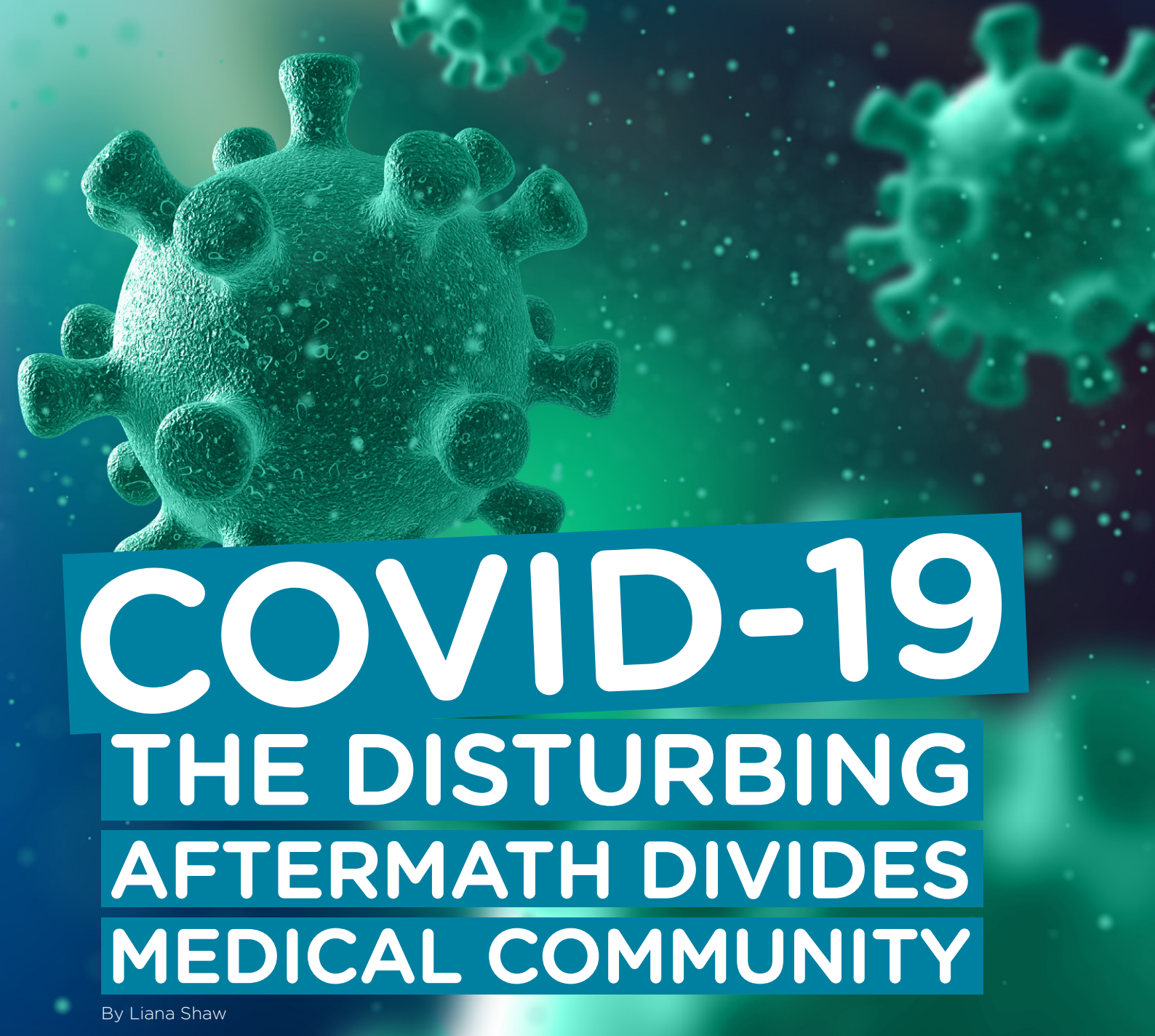
Product innovations in gap cover have proven successful, aligning with current trends in the insurance and financial planning sectors. Beyond addressing immediate medical needs, gap cover now also extends to include contributions towards dependents' medical aid for six months and full gap cover for 12 months, after the policyholder's passing.

Finally, what can consumers expect in the future, by way of healthcare inflation and how medical schemes are likely to respond to the rising cost of private healthcare?

Rising costs have made medical scheme members evaluate their medical cover, and many have changed their plan to better suit their health needs. Many, for instance, were over insured or choosing plans that did not effectively cover their needs.

If a person suffers from a chronic condition, they need to ensure their condition is covered by their medical plan. At the end of the year, members get the opportunity to make sure their cover meets their needs, and to change it, if it does not.

In an ongoing quest to expand her skills and knowledge base, Baisi also signed up for a Management Development Programme (MDP) with Unisa- SBL, and is currently also studying towards her Post Diploma Financials Planning (PDFP), with the University of the Free State.



COVID-19

THE DISTURBING AFTERMATH DIVIDES MEDICAL COMMUNITY

By Liana Shaw

When one of our freelance colleagues, 86, contracted Covid in 2020, his health deteriorated rapidly. Eventually, he ended up in ICU, on a ventilator. Being elderly and a diabetic, we feared the worst. Astonishingly, he recovered. Conversely, another person we knew, 42, was not so lucky. He was diagnosed with Covid-19, got progressively worse and was eventually admitted to ICU, eventually passing away from renal failure. He was relatively young, an athlete, who did not smoke or drink. How could this happen? We were shocked and understandably frightened by the prospect that someone like him did not survive.

Of course, this was before the advent of the Covid-19 vaccine – which, in itself, has been the center of much controversy – with recent reports questioning its validity and safety. We know that the vaccine was developed in an unusually short space of time and did not undergo the standard lengthy studies required with the launch of a vaccine for global use. But, with so many global deaths being recorded, time did not permit. Did we have a choice? People around us were dying.

Our lives were on hold. We were unable to go to work, visit our elderly relatives, socialise or travel. Taking or not taking the vaccine remained a matter of choice, but for most – myself included – we were willing to take the chance.

The jury is out

With the passing of time, reports are beginning to filter in, alleging that Covid-19 and/or the Covid-19 vaccine are responsible for worrying new health conditions, most notably myocarditis, also known as inflammation of the heart muscle. The inflammation can reduce the heart's ability to pump blood and can cause chest pain, shortness of breath and rapid or irregular heart rhythms (arrhythmias). Severe myocarditis weakens the heart so that the rest of the body does not get enough blood. This can cause clots forming in the heart, leading to a stroke or heart attack.

According to the Mayo Clinic, infection with a virus is one cause of myocarditis, although it can also be due to a drug reaction or general inflammatory condition.

A growing number of reports suggest that

Covid-19 or the vaccine itself, may well be the reason why young, fit athletes are developing cardiac conditions, leading to their early demise.

On the contrary, according to the Office for Science and Society, and referencing a recent article in the journal *Circulation*, they claim these allegations are unsubstantiated.

They say, a recent report, revealing the results of a comprehensive, 20-year study in sudden cardiac death in young athletes, reviewed records from the NCAA, the Parent Heart Watch Database, the National Center for Catastrophic Sports Injury Research and Insurance Claims. The report demonstrated that sudden death among athletes is fairly rare.

Over this period, 1 102 deaths were documented in the student athletes who enrolled in the study, with sudden cardiac death named as the cause in 143 cases. Of these 143, 118 were verified using autopsy or other records. Many athletes had normal hearts on autopsy but most had hypertrophy (a thickened heart muscle). Two died of commotio cordis (a blow to the chest that caused an arrhythmia), ten had congenital anomalies of the coronary arteries, eight had myocarditis, but all but one case happened before the pandemic, and the case was a type of myocarditis that was unrelated to either Covid-19 infection or vaccination.

“Contrary to popular mythology, the notion that waves of young people developed myocarditis and then suddenly dropped dead mid-game is not based in reality,” says the Office for Science and Society.

“In fact, the incidence of sudden cardiac death among athletes has reduced over the last 20 years. It has not been increasing and there was no spike in cases after the introduction of the vaccine. Science conclusively proves this.”

“While Covid-19 can have significant cardiovascular manifestations, recent data demonstrate that a screening approach guided by severity of Covid-19 infection and cardiovascular symptoms allows the majority of athletes to safely return to play in a timely manner,” counter-argued an article at <https://pubmed.ncbi.nlm.nih.gov/34690485/>, (an official website for the United States government).

Somewhat of a mixed reaction, with some medical authorities completely discounting a

link between Covid-19 and cardiac-related health issues, and others saying the pandemic could be responsible for triggering cardiovascular issues in previously healthy individuals.

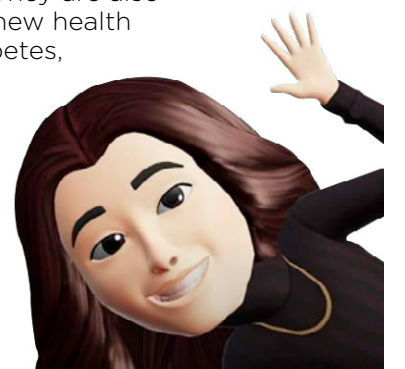
Multiple studies are currently underway to test these contrasting theories, but it will be some time before we get any concrete data.

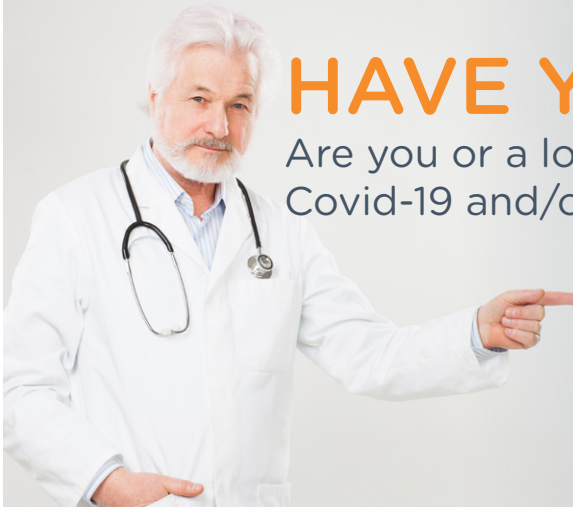
What about Long Covid?

We all know of someone currently living with the lingering effects of Covid-19, my 21-year-old daughter being one example. She contracted the virus at 18, before the vaccine had been made available. Her sense of smell disappeared as did her liking for certain foods she used to love, the ramifications of which remain with her to this day.

But, by all accounts, she is one of the lucky ones. Others we know of continue to struggle with tiredness or fatigue that interferes with daily life, fever, difficulty breathing or shortness of breath, a lingering cough, chest pain, fast-beating or pounding heart, (also known as heart palpitations), brain fog, headaches, sleep problems, lightheadedness, pins and needles, change in smell or taste, depression or anxiety, to name but a few worrying symptoms.

Medical experts say that people with Long Covid may develop or continue to experience symptoms that are hard to explain and manage, (symptoms that are similar to those reported by people with myalgic encephalomyelitis fatigue syndrome (ME/CFS) and other poorly understood chronic illnesses that may occur after other infections. And some people, (especially those who had severe Covid-19), are experiencing new health issues involving many body systems, including the heart, lung, kidney, skin and brain. They are also most likely to develop new health conditions such as diabetes, heart conditions, blood clots, or neurological conditions compared with people who have not had Covid-19. This according to an article at <https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects/>





HAVE YOUR SAY...

Are you or a loved one experiencing ill-effects from Covid-19 and/or the Covid vaccine?

Take our poll and tell us about your personal experience with the pandemic:

- ☐ Yes
- ☐ No
- ☐ Unsure

FALLOPIAN TUBE CANCER LINKED TO BREAST AND OVARIAN CANCER

By Liana Shaw

Is there a history of breast or ovarian cancer in your family? If so, you need to take note of another female cancer that may potentially affect you, especially as you age. Fallopian tube cancer, the rarest cancer to affect the female reproductive system (gynaecological cancer), is not common, (fewer than one percent of gynaecological cancers start in the fallopian tubes). Nonetheless, because it is another form of cancer that is difficult to detect, it can prove deadly.

What is fallopian tube cancer?

Fallopian tube cancer forms in the ducts (tubes) that carry eggs from the ovaries to the uterus, (most females have two fallopian tubes, one on each side of the pelvis).

Interestingly, for most women diagnosed with this particular cancer, the cancer starts somewhere else in the body and then spreads to the fallopian tubes, (metastatic cancer).

According to the Cleveland Clinic, fallopian tube cancer accounts for up to 70 percent of all epithelial ovarian cancers, (most cancers in the ovaries, fallopian tubes and the peritoneum are grouped together for diagnosis, treatment and management).

Who is most at risk?

More than half of women who develop fallopian tube cancer or ovarian cancer are over the age of 63, so regular screening after 60, is very important. As already mentioned, a family history of breast cancer, ovarian cancer or fallopian tube cancer is another risk factor.

Ethnicity and origin also play a role, with people living in North America or those of Northern European or Ashkenazi Jewish heritage at added risk.

Other risk factors may include hormone replacement therapy after menopause, infertility problems, or having no pregnancies, obesity (especially during early adulthood), as well as some inherited conditions such as Lynch syndrome and Peutz-Jeghers syndrome.

What are the symptoms?

Some signs to look out for include abdominal pain or bloating, abnormal menstruation, chronic back pain, constipation, pelvic pain, upset stomach (indigestion) and watery or bloody vaginal discharge.

But, as these symptoms are often vague and could indicate a host of possible benign conditions, they are often dismissed, and the cancer may then spread to the nearby tissues in the pelvic region, or even to the lymph nodes or organs, eventually affecting the liver or distant organs like the lungs or brain.

Imaging (CT or PET) scans are used for detection, and if surgery is required, a biopsy of the affected tissue and nearby lymph nodes is taken for further assessment.

Management, treatment and costs

As with most cancers, treatment options may vary, depending on the stage and type of cancer that is diagnosed, but typical treatments include:

surgery to remove the uterus (hysterectomy) and the fallopian tube and ovary (salpingo-oophorectomy); chemotherapy; or targeted therapy to stop the growth of certain cancer cells with minimal damage to other, healthy cells.

According to Health-e News, the cost of a hysterectomy procedure in South Africa can range from R50 000 to R100 000, not to mention chemotherapy costs, which according to the Groote Schuur Hospital, average at a whopping R15 774 per session!

With medical costs soaring year-on-year, making provision for dread diseases makes a lot of sense, especially as we age. To supplement any medical bills not covered by medical aid, taking out additional cover comes highly recommended.

There are many products on the market to choose from. My personal favourite is the Female Cancer Cover by Total Risk Administrators, which retails from just R130.00 per month, and covers a range of female cancers.

Can fallopian tube cancer be prevented?

Although prevention is not an exact science, medical professionals recommend breastfeeding, (if possible), cutting back on alcohol, not smoking, choosing hormonal birth control options such as the pill, a hormone-based IUD or implant, eating a healthy diet and staying physically active.

More important, if you have a family history of any of these cancers, you may consider taking a genetic test to check for changes to the BRCA gene, which can show if you have a BRCA mutation or a syndrome that increases the risk of gynaecological cancers.

Should you have this mutation, a salpingo-oophorectomy surgery, (a preventive procedure) can lower cancer risk by as much as 96 percent.



GAP COVER MYTHS DEBUNKED!



Myth #1

GAP COVER IS UNNECESSARY IF YOU HAVE MEDICAL AID

A common misconception is that medical aid negates the need for gap cover. The opposite is true! Your medical aid pays at scheme tariff/rate and does not always cover 100% of the medical costs, especially when specialists charge above the standard medical aid tariffs, which is often the case.

This results in significant out-of-pocket expenses. Gap cover bridges the financial void, so you do not have to find money you might not have, to cover the shortfall.

***TRA Gap Cover:** A supplemental insurance policy that covers the difference (or 'gap') between what your medical aid pays and the actual fees charged for in-hospital procedures, co-payments, specialist charges and other treatments not fully covered by your medical aid.

APPLYING FOR GAP COVER IS COMPLICATED AND TIME-CONSUMING

Nobody has the time or energy to spend copious amounts of time on applications. TRA understand this, which is why their process has been designed to make your life easier. Try it for yourself!

***TRA GAP COVER:** Their user-friendly online application forms and dedicated customer support are easy and fuss-free. Testimonials from satisfied customers are testament to this. All documents are also available via their TRA broker toolkit.

Myth #4

Myth #2

GAP COVER IS TOO EXPENSIVE

When weighed against the potential financial risk of uncovered medical bills, the cost of gap cover is a reasonable investment, seeing as it takes care of large unforeseen expenses.

***TRA Gap Cover:**
Basic Cover 300 - from R99p/m;
Vital Cover Plus - from R300p/m;
Super Cover Plus - from R330p/m;
Absolute Cover Plus - from R590p/m.

Myth #3

GAP COVER IS ONLY BENEFICIAL TO THE ELDERLY OR THOSE WITH SEVERE ILLNESS

Medical emergencies and unexpected health issues do not discriminate by age or health status. From sports injuries to sudden illnesses and accidents, gap cover is a must for all medical scheme members, irrespective of your benefit option!

***TRA GAP COVER:** Starting from as little as R99p/m (Basic Cover 300), TRA covers medical treatment shortfalls, casualty, cancer treatment, medical scheme benefits extension, accidental death and emergency assistance.

Myth #5

THE CLAIMS PROCESS IS OVERLY COMPLICATED

Not with TRA! While there is certain minimum information required, (provider statement, medical aid statement, hospital admission confirmation),

TRA's gap-cover claiming process is as simple and efficient as possible, offering the following ways to claim:

- Online claims submission
- Dedicated claims channel
- Via the TRA claims mobile app

>>CLICK HERE<<
TO READ THE
FULL ARTICLE

Medical aid schemes offer a variety of plans, each with its own set of benefits, premiums, contracted providers and, most importantly.....co-payments! Without expert guidance, it is easy to get lost in the jargon and fine print of medical schemes and their benefit options. This is equally true when it comes to sourcing the best gap cover provider for you.

So, do you go through a broker or not?

Brokers are there to provide personalised advice based on your respective health needs, financial situation and future plans. A good broker will take the time to understand your specific circumstances and help you to make an informed decision.

And, their expertise in the field means they can explain complex terms in simple language, on a benefit option that suits your individual healthcare needs, making for a transparent and understandable process.

Another reason to secure the services of a broker is that healthcare regulations and medical aid options are constantly evolving. Brokers are mandated to stay abreast of these changes, to ensure the advice they provide is current and relevant.

Brokers are not only expected to be accredited with the Council of Medical Schemes and the Financial Services Conduct Authority, they are also required to take a competency assessment on scheme specific benefit options, on an annual basis.

So, if a compliant process is what you're after, working through a broker is a must!

They manage the paperwork, communicate with medical aid and gap cover providers, provide you with services as defined in the Medical Schemes Act, and where necessary, advocate on your behalf.

In short, brokers are essential allies when it comes to choosing the right medical aid and gap cover plan for you!

They simplify the complexities, provide tailored advice and keep you informed.

Also, remember that broker commissions are built into the standard premium rates, so consumers do not pay extra to use a broker, except for perhaps, a small admin fee, which some brokers may request for additional services. In the end, whether you go through a broker or not remains a personal choice. But for many navigating the medical aid landscape, a broker is not just an option; they are a necessity!

TO BROKER, OR TO NOT... THAT IS THE QUESTION!

Let's face it - making the right choice in this world of medical aid plans and medical gap cover can be daunting!

STAY HEALTHY this winter!

Winter is on its way, and with it, come all the nasty flu and cold bugs. The University Health Center in Nebraska, USA, shares a few simple tips that can boost your immunity and prevent illness.

Limit the spread of germs

Remember to cover your mouth and nose when you cough or sneeze. If you don't have a tissue, cough or sneeze into your upper sleeve or elbow (as advised during the Covid-19 period). Wash your hands regularly using soap and warm water and scrub for at least 20 seconds. If you can't wash your hands, use an alcohol-based hand sanitiser.

For added protection, carry sanitiser with you to spray onto trolley handles when you shop, thereby limiting your exposure to germs. I carry spray sanitiser in my car and use it after every shopping excursion, or after using elevator buttons etc.

Stay hydrated

Drinking enough water each day boosts your immune system and helps you fight viruses. Aim to drink enough water to equal two-thirds of your body every day. For some of us, drinking enough water

during the winter months, is a tall ask. Add fresh strawberries, lemons, mint or cucumber to your water for flavour.

Up your vitamin D intake

Low vitamin D levels can make you susceptible to illnesses and negatively affect your mental health. Boost your levels by getting in the sunshine and eating foods high in vitamin D, like mushrooms and salmon.

Stay rested

A lack of sleep can lower your immune system. Maintaining a consistent sleep schedule and getting seven to nine hours of sleep per night lets your body recover and protect against sickness.

Get vaccinated

Immunisations are an important strategy to help prevent the spread of Covid-19 and seasonal flu, so get yours, especially if you are immune-compromised.



TRAUMA COUNSELLING AT YOUR FINGERTIPS

Over past editions of The Gap Insider, we have been introducing you to the numerous benefits of the TRA Assist app. Powered by MobiMed, this app is a must-have for all members, providing life-saving assistance when needed. But did you know, that this invaluable app also includes a Trauma Counselling service?

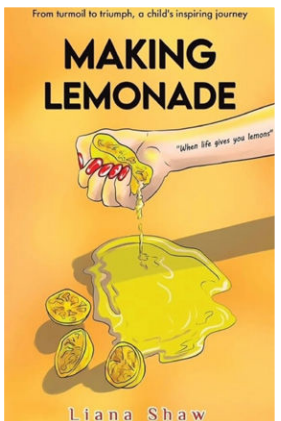
With the promotion of emotional well-being and critical incident support services, at the forefront of the TRA management team, MobiMed appointed trained counsellors in and around the urban hubs of the country, ready to assist at the touch of a button. Services include: Telephonic counselling with the Nurse Care Management team or trauma counsellors; critical incident management and emotional support; referral to a specialist network of psychologists and psychiatrists, if required.

Top five reasons for calling the team are death, armed robbery, threatened suicide, hijacking and shooting incidents.

Speaking of trauma, our very own magazine editor, Liana Shaw, has experienced her fair share over the

course of her life. She documents some of her painful childhood experiences, alongside the decision she ultimately took to not allow 'life's lemons' define her, in her newly-published memoir, Making Lemonade - now available worldwide.

If you would like to receive your free copy of her inspirational story, please email liana@satreads.com. The first reader request will receive a free, signed copy of the book.



PODCASTS

Let's Take Care

Listen to our various PodCasts hosted by Liana Shaw



Should I use a broker for my healthcare needs?

In our ongoing series, Liana Shaw talks Health and specifically whether we need to use the services of a broker for our healthcare needs. Have a listen as she unpacks this much debated topic.

[Click onto our podcast for the details.](#)



Fallopian Tube Cancer

As we continue our Let's Talk Health series, Liana Shaw shares some information about a topic that affects more women than we realise: Fallopian Tube Cancer.

[Click onto our podcast for the details.](#)



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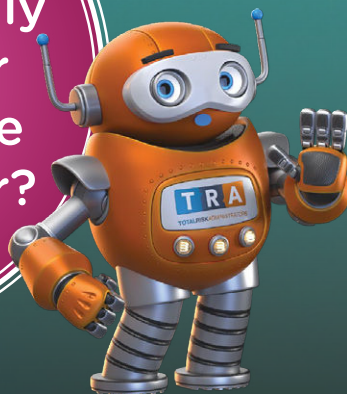
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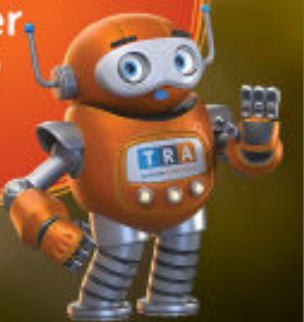
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Thank you to everyone who entered!

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is the name
of TRA's orange
and silver
AI Bot?



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TRA PAYS IT BACK!

To quote Anne Frank: “No one has ever become poor by giving.” And what better way to give back than by investing in the community and society at large – a motto TRA has pledged to live by, since its inception in 1999. The locally bred leadership of the company clearly has a grasp on the history of our country, which is why they believe strongly in contributing towards society.

Health

When it comes to health - TRA's core business - the company remains firm in its commitment to provide affordable gap cover policies, thereby ensuring that member out-of-pocket expenses are limited.

Geoff du Preez, the company's Chief Operating Officer, goes a step further and states: “Our support for the principal of universal health cover in a sustainable, cost-effective way, providing our citizens with quality health, is an issue that must receive our support and we will partner with like-minded entities to achieve such a goal.

“Sharing our many years of experience and expertise in the management of health funding, administration and systems capability, we believe we can add value to the process,” du Preez adds.

By way of example, TRA is presently sponsoring the Olympic Swimmer, Matt Sates, by way of providing for all his healthcare needs, as an international athlete.

Social investment

Another way TRA is living by its motto to impact positively on society and make a difference in the lives of those less fortunate, is by participating in the Hot Cares programme, by way of monetary contributions to the radio station, HOT 102.7 FM, which is embroiled in a host of fundraising campaigns for a variety of charities.

Environmental sustainability

“The issue of sustainability continues to dominate the boardroom here at TRA,” claims Warren Gates, Head of Communication, Training and Public Relations. “We have a proven track record in caring for our environment and we are striving to be as compliant as possible in this regard, via the greening of our office environment, creating awareness around our own carbon footprint, and recycling of material.

“Plus, we are driving inter-generational ethics that underpin our management philosophy,

ensuring that the decisions taken in the business do not undermine the environment, and that those who follow us have the same opportunities to be able to create wealth, utility or welfare in a sustainable way for mankind and the planet,” he says.

Sports development

Currently, TRA is involved in a number of sporting initiatives, among them, partnering with the Border Icons in Sport in sponsoring the Celebrity Golf Challenge, designed to support the foundation for key sports and the upliftment of sport in the Eastern Cape. The Celebrity Challenge brings some of our finest sporting heroes together on the golf course, to support the worthy cause of creating opportunities for talented boys and girls, who would otherwise have slipped through the system.

Another exciting project in which TRA is participating is the TRA Cup – a soccer tournament for primary schools in the greater East London area – a sporting initiative designed to keep young people engaged, thereby avoiding the perils of substance abuse and teenage pregnancy.

The TRA Cup will see 12 primary school teams participating and competing for the coveted TRA Cup.

“We are a business that operates in communities and giving back to society in a sustainable environment. This is our philosophy,” reiterates du Preez.

“The issue of sustainability continues to dominate the boardroom at TRA.”

Warren Gates

Matt Sates

on preparation for the Paris show piece

The TRA Executive Head for Communications, Public Relations and Training, Warren Gates, caught up with Matt Sates at the beginning of April, while he was slogging it out at the High-Performance Centre at the University of Pretoria.

Photos © South African Sports Images

WG: Hi Matt, I thought I'll pop in checking if all your health requirements are in place for your upcoming travels and make some time for a coffee. Are you good for a catch up after training?

MS: Hi Warren, I am delighted to see you and thanks once again to the TRA Team for looking after my healthcare cover and everything that goes with it. I would love to catch up and will meet with you in the cafeteria.

WG: How is your overall training programme going? I see your coach is quite a bit of a hard task master.

MS: Yes, Warren. As you know, we have the Olympic Games this year and that journey started two years ago, and a big milestone was the Doha World Champs in Japan in 2024. I missed the Fukuoka Champs in 2023 which was a bit of a setback. We have the South African National Championships in Port Elizabeth next week and my aim is to use it to focus on improving my Qualifying times.

WG: Do you expect the competition to be tough at the Nationals next week. Who is likely to feature there?

MS: SA Nationals brings out the best in our swimmers as there are Qualifying spots for Olympics and Junior world championships at stake. There is also Commonwealth and the Junior Olympics on the horizon. Chad le Clos and the up-and-coming Jarden Eaton in Butterfly are of course serious competitors and events like the 400 free and 400 Individual Medley have at least five serious competitors. Nevertheless, that is the nature of swimming and a professional athlete like me must be in top shape all the time. Enough about me how are things at TRA and the team? Please let them know I appreciate what they mean to me.

WG: Thanks Matt - we're all working hard to make sure we deliver the best gap cover products on the market. We will let them know and rest assured, the TRA Team is rooting for you like never before and we wish you well with your training programme. What is next for you after the SSA National Championships?

MS: Warren for now I am focussing on one milestone at a time and with the SA Nationals my mind is pretty much fixed on improved times. I am so thankful for all the support in the country and particular the TRA Team and I will be visiting the office soon.

WG: Great to hear Matt and thanks again for your time.



Matt Sates shines at Swimming South Africa National Championships

The country's elite swimmers gathered in Port Elizabeth at the Swimming South Africa Senior National Championships. This was indeed a special championship and was a qualifying event for the Paris 2024 showpiece taking place in July and August of this year.

Of course, among them was our own 20-year-old Matt Sates, who looks in pretty good shape and from his own high standards did not have the best performance at the World Championship in Doha. Visiting Matt at the High-Performance Centre, at the University of Pretoria and just watching him train, it seemed that he was on course for an exciting championship.

This turned out to be the event for the young guns, with Matt taking silver in the 50m Butterfly, then a hard-fought battle with birthday boy Chad le Clos which saw both athletes achieving gold in the 100m Butterfly, with Sates turning first at the 50m mark and both finishing with a time 52.07. It was a very exciting tied finish for the fans at the pool.

At the medal presentation, Le Clos gave all credit to Matt, saying: "He really made me dig deep", and stating that both athletes are looking forward to tough competitions at the Olympic Games.

Matt went further and raced to his fourth gold medal in the 200m Individual Medley, to add to his 200m Freestyle and 200m Butterfly titles, and of course the dramatic tied finish for gold in the 100m Butterfly.

The Team at TRA wish Matt well in his preparation for the Paris Olympic Games.

TRA SPONSORS U-13 PRIMARY SCHOOLS SOCCER TOURNAMENT

In the spirit of paying it back and actively contributing to the community, TRA, in conjunction with Border Icons in Sport (BIS), are sponsoring an Under 13 Primary Schools Soccer Tournament in East London.



Organised by the Stella Jessie Esbend Local Football Association (LFA) and Saints FC, and held under the auspices of (BIS), this initiative reflects their motto of “Restoring the Soul and Dignity of Communities through Sport”.

This year’s tournament sees 12 teams competing in a round-robin format, split into two groups of six. This format ensures a wide-ranging and competitive platform for the teams, allowing them to showcase their skills and determination. The top two teams from each group will advance to the knockout stages, culminating in an exciting final match.

The grand finale is scheduled for May 17th, 2024, at the North End Stadium.

At the time of writing, the tournament had already kicked off and 2 rounds had already been played and the initial response from the entire community has been outstanding.

Geoff du Preez, Chief Operating Officer of TRA expressed his gratitude to the Border Icons in Sport, the host of the tournament and reiterated that the objective is to unearth young talent, provide youngsters with opportunities and to engage the youth on issues of substance abuse.

He states further “We must all contribute to building the South Africa we want to see and Total Risk is no exception. We are a company that has clients within our communities and this tournament is testament of our commitment to engage and believe that our youth is the future of our country. The Border Icons in Sport and our company share a set of common values in creating impact where it is needed to change lives of communities. We want to take the opportunity and wish all the youngsters who are participating the best of luck and may the best team win. Take the opportunity to live your dreams and make them stick. To the Local Organising Committee, a big thank you for your endeavours and we look forward to a long association with the Border Icons in Sport.”



Teams are competing to win the TRA Cup and there will be trophies for the Golden Boot, the most promising player as well as the goalkeeper of the tournament. The biggest prize though is the chance for one player to be selected to attend a training camp at Napoli FC, the famous Italian soccer club. This has graciously been donated by Munya Maraire, CEO of World Wide Scholarships

We wish all players the best of luck! Look out for the full results and tournament report in our next issue.

COMPLIANCE
CORNERFSCA
Engagements,
Workshops and more...

2024 has got off to a flying start, with many FSPs wanting to get their house in order, to tackle a successful year ahead. We had some fruitful engagements with the Regulator over the last few weeks with a meeting held with the licensing and business teams, attendance at the Enforcement Workshop hosted by the Regulator, as well as the successful approvals of the first few crypto asset category additions. Needless to say, you may have seen many an FSP being penalised for lack of implementation of their FIC Risk Management & Compliance Programme, so be careful and reach out for any FIC training or implementation needs.

Our meetings were engaging, and it is promising to note plans for the FSCA to move to a paperless environment, streamlining and creating more efficiencies within the licensing and profile changes area. We will be part of testing these new ways of working, so look forward to further updates. The enforcement workshop held late February highlighted the importance of key individual oversight, FICA due diligence and practical application as well as the ability of the Regulator to use a wide range of investigative powers to conduct in depth investigations. These include interviews under oath, the power to subpoena documents and in appropriate instances, execute a search and seizure warrant. Many a funeral parlour have been found conducting unregistered insurance business. It is best to seek expert advice should your FSP be investigated, but moreover, don't let it get to that point by keeping all of your compliance in order.

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 ON A
LIGHTER NOTE...


Doctor: You are very sick.

Patient: Can I get a second opinion?

Doctor: Yes, of course! You are very ugly too.



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