



Wellness & Health



**SERVICE
PROVIDER
ENGAGEMENTS**

FIRST IN MEDICAL AID CONSUMER FAIR 2019



Adult Child
Dependant



Extended
Premium Waiver



Health
Challenge



Breast Cancer
Awareness

**Inside
NEW
PRODUCTS
LAUNCHED**

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ADULT CHILD DEPENDANT MEDICAL AID COVER

- Open to a members children who are between the ages of 21 and 35
- Dependent membership will have their own medical aid benefit option



EDITOR'S NOTE

I am delighted to introduce the first publication of the BPOMAS Wellness & Health Newsletter. W&H provides an exciting opportunity to further engage with BPOMAS customers on a relaxed and informative platform.

The objective is to publish up-to-date, customer driven information alongside relevant and insightful articles. As such, the newsletter aspires to be vibrant, engaging and accessible, and at the same time informative and challenging. Each issue of the newsletter will contain three types of information. The first, thematic highlights; these will provide a short and provocative "opinion piece" on an issue of the month, synthesizing the issues and ideas pertinent to marketing and communicating the latest developments within BPOMAS.

The second, events & activity reviews, will providing a concise yet comprehensive review of events and activities of the period leading to the publication. This way if the member missed any of our activities they will be informed of what has happened.

The third and final type, all and all, this will be more traditional information akin to newsletters underpinning the essence of what we do. Hopefully these will be relevant articles with a clear contribution to knowledge in the field of health and healthcare management. While this may



EDITOR'S NOTE

be the case we, however, hope the newsletter will be informative and interesting to read. In the near future, we hope to allow collaborators to contribute articles to the newsletter.

This edition of the newsletter is themed "Its time to care more", highlighting not only our campaign theme for this year but also highlighting the different events we took upon ourselves to extend a caring hand.

Best health wishes and thank you in advance for your contribution, readership and thotloetso. Le kamoso Bagaetsho.



CARING MORE AT BPOMAS

At last, members of **BPOMAS** can now extend medical health insurance to other loved ones. Given the rate of inflation in medical expenses, health insurance is a must for individuals at an advanced age and if they happen to be loved ones, then the need is all the more urgent.

BPOMAS has launched products that extends medical insurance to family members that have not been covered in existing products. These family members include Adult Child Dependent and Parents and Parents in-law. **BPOMAS** has also introduced a critical illness benefit and a Premium waiver, all geared towards ensuring that member interests are met.

Having health insurance for family members is important for several reasons; uninsured family members receive less medical care and less timely care, they have worse health outcomes, and lack of insurance is a fiscal burden for them and medical aid members. Benefits of expanding coverage outweigh the costs for added services. Safety-net care from hospitals and clinics improves access to care but does not fully substitute for health insurance.

BPOMAS is committed to ensuring that access to comprehensive, quality health care services is possible. It is important to promote and maintain health, preventing and managing disease, reducing unnecessary disability and premature death, and achieving health equity for all.

BPOMAS NEW PRODUCTS



Adult Child Defendant

Allows members to cover their children aged 21-35 who are not capable of financing their good health cover.



From as little as **P2.10** per month

Critical Illness Benefit

Gives members a once off cash payment in the event of contracting a critical illness. This could be for any illness that alters the life of the members be it major surgery, vehicular accident, etc.

Extended Premium Waiver

Allows principal members to insure that their dependents will be covered on medical aid for up to three (3) years after their death. No additional premiums received.



From as little as **P2.90** per month



Parents and Parents In-law cover

Members can now cover their biological parents & parents in law on medical aid. Upto four parents can be covered.



bpomas

NATIONWIDE HEALTH CHALLENGE

It's Time To Care More

The **BPOMAS** Nationwide Health Challenge

The BPOMAS Nationwide Health Challenge, say hello to a healthier you!

This initiative challenges every BPOMAS member to embark on a rewarding fitness journey for 8 weeks. It also inspires participants to work towards a common goal of maintaining healthier, active lifestyles in the long run.

Being active is not just about moving; it's about challenging ourselves to maintain the healthiest lives possible by focusing on our physical, emotional and mental wellbeing. BPOMAS Nationwide Health Challenge goes beyond building an ever-evolving nation into an inspirationally active one – it is about pushing members

to live their happiest lives.

Who can participate?

All BPOMAS members & their dependents! Whether you're a dedicated fitness enthusiast with multiple marathons under your belt or a novice who shies from sports and gyms, everyone is welcome. BPOMAS invites members of all ages, abilities and interests to find an activity that works for them. Events are incredibly inclusive and designed with every kind of member and dependent in mind, from people of determination to the elderly. Members are encouraged to follow BPOMAS social media platforms and website as well as acquaint themselves with local press media to regularly get details of health challenge locations and application process. .

So far the Health challenge has been to Molepolole and it's currently in Maun. The response to The BPOMAS Nationwide Health Challenge has been remarkable. Members and the public are encouraged to look out for the challenge in their areas, as it runs across the nation from village to village

FLU VACCINE

Vaccine effectiveness is an estimate of the likelihood that a vaccine prevents influenza infection when used in everyday practice. To establish how well influenza vaccine work each season, influenza vaccine effectiveness is measured in observational studies. BPOMAS engaged on a Flu Vaccine pilot project to determine the efficacy of the project in the medium and long term for the fund.

BPOMAS believes that immunity that is elicited by influenza vaccines is not as long lived as the immunity following natural influenza infection but initiated this pilot to individuals in the so-called risk groups, hence people have to be vaccinated annually. There are three reasons as to why this pilot was initiated:

1. Protecting the vulnerable

The main strategy of pilot was to determine the extent to which these vaccinations can directly or indirectly protect the more vulnerable individuals. Direct protection involves immunising people who are more likely to develop severe disease if they are infected by influenza viruses (risk groups). While immunising members of risk groups means direct protection, there is also an indirect benefit of protection strategy of those with close contact with people in the risk groups.

2. Protecting healthy children

Healthy toddlers and younger children are prone to severe influenza disease. Influenza epidemics are also an important cause of many bouts of short-lived but debilitating illness leading to school and



work absence. Hence many parents choose to get children immunised. Additionally, due to the economic impact and social disruption, employers often encourage immunisation of their staff and make it readily available.

3. Reducing overall influenza transmission

This proposed pilot is based on the observation that much of the influenza transmission takes place in older vulnerable adults and in children's day care facilities and amongst school age children. So immunising children and in addition to the older population, may reduce overall influenza transmission and protect those in the risk groups.

BPOMAS is currently is assessing the results of the pilot to determine the potential way forward. This will be communicated in the coming year.



Introducing Adult Child Dependent Cover

Just graduated? No Job Yet? Worried about not having income to sustain medical cover? Panic Not! **BPOMAS** now allows you to be a dependent up until age 35. Your health will always be our concern.

It's Time to Care More.

T's & C's apply

For more information call: 370 2907

 Botswana Public Officers Medical Aid Scheme

 www.bpomas.co.bw

 [bpomas_officialbw](https://www.instagram.com/bpomas_officialbw)



SALES ACTIVATION



To grow consumer knowledge, BPOMAS engaged in member education activations around the country from the Kgalagadi region, Charles Hills to Tsoabong, Kang, Hukuntsi, Gantzi, Kanye, Jwaneng, Lobatse, Mahalapye, Palapye, Serowe, Francistown, Maun and Kasane.

The activations were fruitful, and members made inquiries and received immediate response from BPOMAS staff, over and above it was also an opportunity for intending members to get applications forms and apply for medical aid.

The scheme intends on engaging in the same activations in the next year too.

Did you know?



Optimists often have lower blood pressure, which reduces the risk of coronary artery disease as found in a study by scientists at Harvard and Boston Universities. Be an Optimist!

#HealthFacts



Nearly 30% of the world's population is obese. Do not be part of the statistics! Take action!

#HealthFacts



UPDATE TO BPOMAS MEMBERS ON THE RECENTLY INTRODUCED DENTAL HEALTH RISK MANAGEMENT

In recent years, **BPOMAS** has seen an above-normal increase in certain categories of the Scheme's healthcare costs. There are many contributing factors to the aforementioned increase, the main ones being waste, abuse and in some instances possible fraud. The Scheme has in certain instances recovered funds from errant service providers and has terminated contracts with some for waste, abuse and possible fraud.

As an industry standard, healthcare costs in general are expected to increase annually by a margin of 3% above inflation. On the other hand, **BPOMAS** health care costs have been increasing annually by a margin of around 5% above inflation. In light of the afore-mentioned, **BPOMAS** has therefore introduced Managed Care interventions in various disciplines, the first being on Radiology and Pathology which was introduced in the financial year 2017/18, followed by introduction of pre-authorization on hospitalisation in the current financial year. These have thus far yielded significant positive results.

Dental claims have on average increased by more than 18% per annum in the last 5 years, which is more than double the increase in the rest of the Scheme's healthcare costs. Furthermore, as an industry standard/benchmark, dental claims as a proportion of total healthcare costs for a scheme with a similar profile to **BPOMAS** is around 5% while for **BPOMAS** it is currently in excess of 12%. Based on the current claims pattern, the Scheme's dental claims are therefore among those that are clearly not sustainable and call for some intervention.

In light of the above, Dental Health-Risk Management as part of Managed Care was introduced effective 14 October 2019. Through this intervention, all legitimate claims will continue to be paid in full as per the Scheme Rules. On the other hand, illegitimate claims will not be paid when detected. Over and above reducing the risk of Waste, Abuse and fraud, the intervention will among others ensure that;

- There is enhance clinical outcomes while managing members benefits
- There will be peer to peer review
- Benefit design is improved as there is a closely managed usage of the benefits as well as usage of Dental experts in designing benefits

In summary, below are some of the changes that have been introduced;

- Some cases that were previously not pre-authorized (e.g., Specialized dentistry) will now be pre-authorized. Members are to note that basic dentistry, which constitutes most of the dental cases is still not pre-authorized. Furthermore, response to pre-authorization requests is done within 24 hours. Members are to



note also that pre-authorisation requests should be sent by the dentist directly to the Scheme. As such, there is no anticipated delay in delivery of care.

The purpose of pre-authorisation is to ensure that there is clinical appropriateness for such cases/procedures, and reduce the risk of wastage, over-servicing and over-charging.

- Wastage occurs when a more expensive form of treatment is chosen without it being clinically necessary, e.g., removal of a tooth through in-hospital surgery when the tooth could be removed at the dentist's room.
- Over-servicing occurs when interventions that are not clinically necessary are performed and charged to the Scheme.
- Over-charging usually occurs through billing of services that are part of one complete service as separate portions.
- An example of wrong treatment is an age in-appropriate treatment.
- Certain interventions will only be covered on an out-patient basis. This is because there is no clinical justification for them to be covered in-hospital.

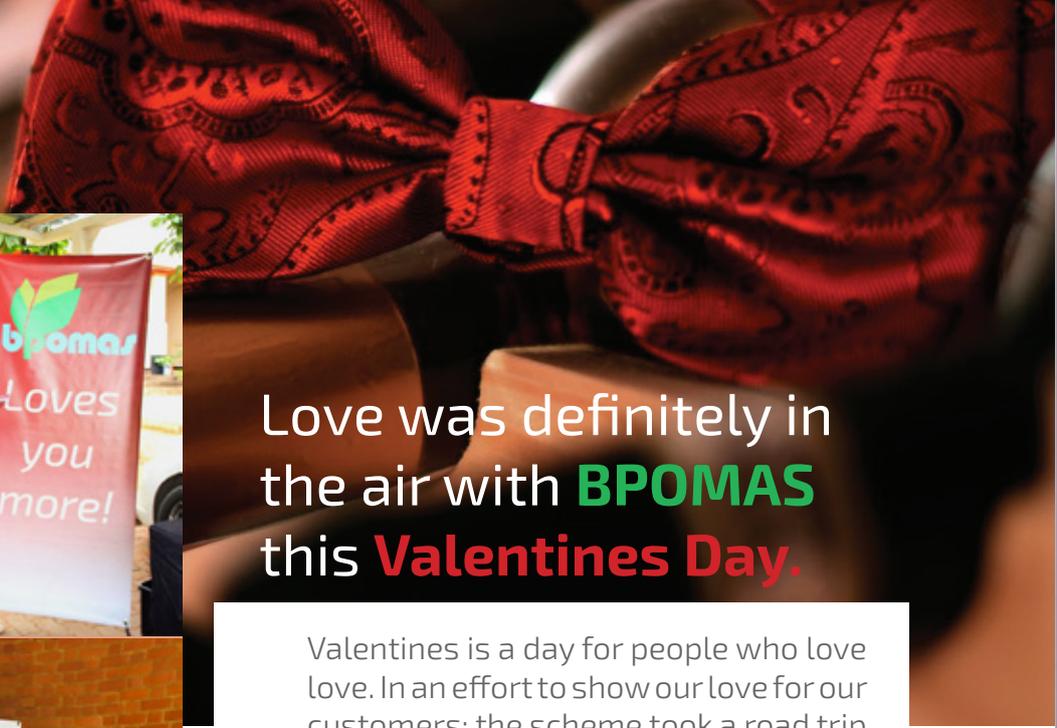
With these changes, we are confident that **BPOMAS** members will experience enhanced clinical outcomes at an affordable cost as benefits will be protected from erosion. Managing the risk of wastage, abuse and fraud will make **BPOMAS** membership even more affordable without compromising on the quality of care.

BPOMAS members are therefore informed that, at this stage, some dentists, particularly members of the Botswana Dental Association (BODEA) have opted to terminate their contracts with the Scheme effective 4th November 2019 due to lack of agreement and/or buy- in on the recently introduced Dental Health Risk Management intervention, and as a result will require up-front cash payment. However, some of the dentists still remain contracted to **BPOMAS** and will continue to service **BPOMAS** members without requiring upfront cash payment. For ease of reference, a list of dentists who are currently contracted to **BPOMAS** is available on the **BPOMAS** website; www.bpomas.co.bw. Members are however free to consult dentists who have terminated their contracts with **BPOMAS**, and would be eligible to claim from the Scheme in line with Scheme Rules. For any further clarification, members are advised to call our office on **(+267) 370 2907**.

Management will continue working around the clock to ensure a smooth transition process into what we believe is the best and most prudent management of the Scheme dental benefits . **BPOMAS** also remains committed to working with all Service Providers in order to facilitate ease of access to care. As such, Service Providers who have opted to terminate their contracts with the Scheme, will be considered should they apply to contract with **BPOMAS** again. We apologise for any inconvenience this may cause.

Your health remains our concern.

Thulaganyo Molebatsi
Principal Officer



Love was definitely in the air with **BPOMAS** this **Valentines Day**.

Valentines is a day for people who love love. In an effort to show our love for our customers; the scheme took a road trip to Kanye Town Council and Gaborone Main Mall to furnish government employees with love filled cup cakes. At BPOMAS we always endeavour to put a smile on our customers and staff because we believe Its Time To Care More.



Mothers Day



At **BPOMAS**, our employees matter to us, which is why on mother's day we deemed it fit to appreciate all the women and mothers. We know the joy and fulfillment motherhood brings, but we also understand the weight that comes along with it too, so we treated our gorgeous mums to a pampering session at Camelot Spa and gifted them with Body Shop Hampers. It was just a little something to say we appreciate all the hard work; take a day off! We understand the dynamics lives of our employees which is why we believe Its Time To Care More.

BENEFIT FRAUD

HEALTH BENEFITS ABUSE

WAIVING OF DEDUCTIBLES

WRONG BILLING

OVER CHARGING

The **BPOMAS** Fund has over the years been insourcing most of the services in response to increase costs of health benefits and importantly to protect the member against acts of fraud through detection, investigation and action of all activities of the fund.

By providing group health benefits coverage, the member is investing in their health for themselves and their family. As a member, you share in the responsibility of protecting your health benefits plan from abuse. Health benefits abuse directly impacts you, the member. It can increase the cost of providing a benefits plan, potentially resulting in increased premiums or in some cases, reduced or lost coverage.

By definition, benefits abuse and fraud is any act of intentional deception or misrepresentation of treatment facts made for the purpose of gaining unauthorized benefits. Acts of fraud contain three defining features: intent, deception, and unlawful gain.

These scams can include, but are not limited to:

- Billing for services not rendered
- Misrepresenting dates of service

- Waiving of deductibles and/or copayments
- Misrepresentation of services
- Unbundling services charges
- Overcharging or upcoding routine services
- Diagnosing unnecessary or incorrect treatment

As key to our operations is the need to create a Fraud Investigation and Risk Management team made up of skilled consultants who specialize in risk management. The team is responsible for:

- Implementing preventative strategies;
- Investigating suspicious billing patterns or claims activity; and
- Conducting frequent claims audits. The Unit must take action against abusive activity of healthcare providers through a delisting of these providers and recovering money improperly obtained.

To all members of **BPOMAS**, please be vigilant about your procedures, check and confirm what you have medically performed and ensure that fees charged are correct.



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Botswana Public Officers
Mediacal Aid Scheme



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www.bpomas.co.bw

