# Press Release: 2024 Industry Results from Health Quality Assessment (HQA) MEASURING QUALITY FOR A SUSTAINABLE HEALTHCARE SYSTEM

Ensuring quality in healthcare is essential for the sustainability of the health sector. It plays a crucial role in patient health outcomes, patient safety and the efficient functioning of the health system. Health Quality Assessment (HQA), a non-profit and public benefit organisation, has once again measured and reported on healthcare quality across 83% of medical scheme members in South Africa. This encompasses over 200 health quality indicators, including primary care, maternity and newborn care, chronic disease management, and hospitalisation indicators.

On Friday, 16th August 2024, HQA presented its 20th consecutive annual Industry Report on the quality of healthcare in South Africa. This year's report is based on data from medical schemes representing 104 benefit options and covering 83% of all insured beneficiaries, totalling 7.43 million lives. The analysis included a comprehensive review of 200 health quality indicators.

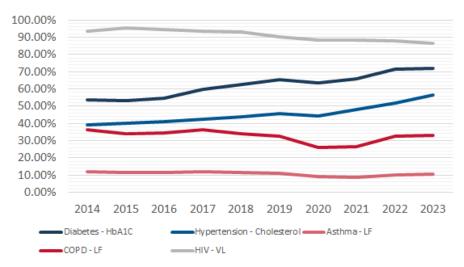
# **Key Findings**

The 2024 data analysis, drawn from claims data up to the end of 2023, reflects a balanced demographic with 3.37 million male and 4.05 million female beneficiaries. The average age of the insured population is now 35.0 years, marking an increase of 3.0 years over the last thirteen years. The increasing prevalence of chronic diseases continues to be a significant concern, with 12.16% of beneficiaries registered for chronic benefits with hypertension (up by 0.71% since 2010), 4.29% with HIV (up by 2.10% since 2011), and 4.61% with diabetes (up by 1.28% since 2010). Overall, 25.30% of beneficiaries have at least one chronic condition.

#### Positive Trends and Areas of Concern

According to Louis Botha, CEO of HQA, the 2024 report indicates encouraging progress in several areas, such as flu vaccine coverage, HIV testing and screening, and antenatal screening. Additionally, there has been significant improvement in the management of metabolic diseases, with coverage of key disease management metrics for diabetes and hypertension increasing by more than 25% since 2010. However, Botha also highlighted areas requiring further attention, including mental health screening and asthma lung function tests, where limited to no progress have been made.

#### Chronic Diseases - Process Measure Trends



## **Primary Care Successes**

A notable trend over time is the increase in flu vaccine uptake among members over 65, from under 15% in 2013 to almost 20% in 2023. Dr Unben Pillay, HQA Director and CEO of the Alliance of South African Independent Practitioners Association (ASAIPA) and a speaker at the event, attributes this success to a concerted effort by both medical schemes and primary care doctors to encourage flu vaccination among patients.

## Non-Communicable Diseases (NCDs)

Statistics from the 2020 Mortality and Causes of Death report by Statistics South Africa identified diabetes, primarily Type 2, as the leading cause of death from natural causes (after COVID-19). By 2040, it is estimated that 8.75 million South Africans will be affected by diabetes. Against this backdrop, it is promising that HQA's results show a significant increase (over 25%) in diabetes monitoring (via the HbA1C test), supporting the effective management of diabetes patients.

#### Preventative Screening

Despite the availability of benefits from many medical schemes, there has been little progress in the number of women aged 50-74 accessing mammography services. This has sparked some schemes to take proactive steps to estimate the risk of developing breast cancer. For those at higher risk, additional screenings such as MRI scans are available.

#### **Maternity Care**

Since 2010, the rate of C-sections has risen slowly but remains high, with 75.81% of deliveries among participating medical schemes being by C-section. This high rate correlates with a 3.1% increase in neonatal ICU admissions. Most babies delivered before 38 weeks require NICU care due to complications. Schemes are increasingly working with Obstetricians to address the potential unnecessary delivery of pre-term babies and to reduce the risk of complications and NICU admissions. To better

understand these indicators, HQA is considering adding an indicator for gestational age at the time of C-section in future reports.

## Hip and Knee Replacements

The duration of hospital stays for hip and knee replacements has decreased, reducing the risk of complications such as deep vein thrombosis (DVT). This improvement is partly due to the introduction of new clinical pathways. While readmission rates for knee replacements have slightly decreased, there has been a concerning uptick in readmissions following hip replacements.

# **Asthma Management**

South Africa ranks 25th worldwide for asthma prevalence and 5th for asthma-related deaths. The decline in lung function testing for asthmatics by nearly 3.5% since 2010 is troubling. Moreover, while nearly 50% of asthmatics are on controller therapy, compliance remains low.

#### **Pneumonia**

There has been a noticeable decrease in hospital admissions due to pneumonia, likely due to increased awareness of infection control measures, such as mask-wearing and hand washing during flu season.

#### Conclusion

HQA's results provide valuable insights into the state of healthcare in South Africa. However, these findings should be interpreted with caution, as various factors contribute to the performance of specific quality indicators. The healthcare system is complex, and multiple elements influence the quality-of-care patients receive. What remains critical is that these results are shared with HQA participants and stakeholders to drive continuous improvement.

**ENDS** 

## **About HQA**

HQA is South Africa's leading health quality measurement organisation. Founded in 2000 as a Not-For-Profit organisation, HQA has held a long-term vision to become the leading benchmarking and standard-setting body for clinical quality measurement in South Africa, with the aim of ultimately including both the public and private healthcare sectors. While realistically accepting that it would take many years to accomplish this vision, HQA has grown from humble beginnings with the initial support of only a handful of medical schemes and administrators, to a point where today it was able to release its 20th consecutive annual Industry Report on clinical quality with individual Scheme Reports to 18 medical schemes. These reports now include data on 83% of the insured lives of the South African health care industry with trend data going back by up to 14 years, where clinical quality is measured against national and international benchmarks and standards.

Currently HQA collects data from, and reports on healthcare quality to, Bankmed Medical Scheme, Bonitas Medical Fund, CAMAF, Discovery Health Medical Scheme, Engen Medical Benefit Fund, GEMS, LA Health, Medihelp, Netcare Medical Scheme, Old Mutual Staff Medical Aid, Polmed, Profmed, Remedi Medical Aid Scheme, SAB Medical Aid Scheme, Sizwe-Hosmed Medical Fund, Thebemed, Transmed Medical Fund and Wooltru Healthcare Fund. Other healthcare member organisations collaborating with HQA on measuring and improving

quality healthcare are: Aspen Pharmacare, BHF, CDE, Discovery Health, IPA Foundation, Johnson&Johnson Medical, Joint-Care Inc, Lenmed, Life Healthcare, LifeSense Disease Management, Mediclinic, Mediscor, Medipost, Medscheme, Momentum Health Solutions, MSD, PPSHA, SAMA, SAPPF, 3SixtyHealth, Universal Care and Workability.

Since its inception HQA has followed a collaborative approach and encouraged voluntary participation in a safe environment, underpinned by strict data security and confidential reporting on a 'no blaming, no shaming' platform. Unlike individual schemes, administrators or other healthcare organisations that rely on their own data, HQA can generate national benchmarks based on well established, evidence-based health quality indicators. Through HQA, schemes can benchmark their performance against their previous year's results as well as against other participating non-identifiable schemes. As a result, the performance of clinical quality indicators has improved steadily year after year.

HQA's Clinical Advisory Board (CAB) has proved, over many years, to be an effective, multi-stakeholder, collaborative forum for developing and reviewing HQA's indicators, as well as its measurement and scoring methodologies. A stable set of approximately 200 indicators has now been developed, of which the majority are process indicators. Currently, medical schemes' claims data is still the main data source.

In the Health Market Inquiry (HMI) Report released in November 2019, it was recommended that HQA should expand its clinical quality metrics to include outcomes measures. Furthermore, the report encouraged HQA to work more closely with health care facilities and practitioners. This has resulted in fast-tracking elements of HQA's long-term strategy.

In 2020 the HQA Board responded proactively by amending HQA's Memorandum of Incorporation (MOI) to include healthcare facilities (such as hospitals) and practitioners as participating members of HQA with similar voting status as medical schemes. The changes to the MOI also made provision for facilities and practitioners to be represented on the HQA Board. The HQA Board is confident that these changes will position HQA to be able to serve more effectively the broader health care industry and the public of South Africa. HQA has retained its Not-For-Profit status and is also registered as a Public Benefit Organisation.

While HQA is making progress towards measuring clinical outcomes, it is mindful and respectful of the roles and responsibilities of its Regulators, namely the Council for Medical Schemes (CMS), the Office of Health Standards and Compliance (OHSC), and the NHI Branch, in that regard. HQA performs a supporting and complementary role, in close collaboration and in a transparent manner.

During the past 3 years the CAB has begun to develop separate workstreams looking at Standard Definitions for indicators starting with hospital admissions, Clinical Registries for outcomes measurement with an active and committed Prostate Cancer Registry working group as well as hospitals and healthcare practitioner sub-groups. HQA has also engaged with the Dutch Institute of Clinical Auditing (DICA) and the International Consortium for Health Outcomes Measurement (ICHOM) seeking to align with international standards and benchmarks.

Looking to the future, HQA is committed to continue developing clinical quality standards and benchmarks for as many role players in the South African health care industry as possible. It has embarked on an ambitious path to draw in more players in both the private and public sector. And, as ever, HQA will continue to strive to be a well governed and sustainable going concern serving the interests of all in our country.