

TRANSMED MEDICAL FUND

Registration number: 1582

**ANNUAL FINANCIAL STATEMENTS
for the year ended 31 December 2022**

TRANSMED MEDICAL FUND
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ANNUAL FINANCIAL STATEMENTS
for the year ended 31 December 2022

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ANNUAL FINANCIAL STATEMENTS

**STATEMENT OF RESPONSIBILITY BY THE BOARD OF TRUSTEES
for the year ended 31 December 2022**

The Trustees are responsible for the preparation, integrity and fair presentation of the annual financial statements of Transmed Medical Fund (the Fund) comprising the statement of financial position, statement of comprehensive income, statement of changes in funds and reserves and cash flows and the notes to the annual financial statements. The annual financial statements presented on pages 19 to 54 have been prepared in accordance with International Financial Reporting Standards (IFRS) and the requirements of the Medical Schemes Act of South Africa. In addition, the Trustees are responsible for preparing the report of the Board of Trustees.

The Trustees consider that in preparing the annual financial statements they have used the most appropriate accounting policies, consistently applied and supported by reasonable and prudent judgements and estimates.

The Trustees are satisfied that the information contained in the annual financial statements fairly presents the results of operations, cash flows and financial position of the Fund at year-end. The Trustees also prepared the other information included in the annual report and are responsible for both its accuracy and its consistency with the financial statements.

No event or item has come to the attention of the Board of Trustees that indicates any material breakdown in the functioning of the key internal controls and systems during the year under review. The Trustees are responsible for such internal controls as the Trustees deem necessary to enable the preparation of the annual financial statements that ensure that they are free from material misstatement, whether due to fraud or error, and for maintaining adequate accounting records and an effective system of risk management.

The going concern basis has been adopted in preparing the annual financial statements. The Trustees believe that the Fund will be a going concern in the foreseeable future, based on forecasts and available cash resources. These annual financial statements support the viability of the Fund.

The Fund's external auditor is responsible for auditing the annual financial statements in terms of International Standards on Auditing and the auditor's report is presented on pages 15 to 18.

The annual financial statements, as identified in the first paragraph, were approved by the Board of Trustees on 20 April 2023 and are signed on its behalf:

.....
B Jonker
CHAIRPERSON

.....
F Mackenzie
VICE-CHAIRPERSON

.....
PL Wassermann
PRINCIPAL OFFICER

20 April 2023

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**STATEMENT OF CORPORATE GOVERNANCE BY THE BOARD OF TRUSTEES
for the year ended 31 December 2022**

The Fund is committed to the principles and practice of fairness, openness, integrity and accountability in all dealings with its stakeholders. The Trustees are proposed and elected by the members of the Fund and the employers.

BOARD OF TRUSTEES

The Trustees meet regularly and monitor the performance of all its contracted service providers against their contractual obligations and service level agreements. They address a range of key issues and ensure that discussion of items of policy, strategy and performance is critical, informed and constructive.

The Trustees perform a self-evaluation to measure the performance of the Board and also evaluate the performance of the sub-committees against their terms of reference.

All Trustees have access to the advice and services of the Principal Officer and, where appropriate, may seek independent professional advice at the expense of the Fund.

INTERNAL CONTROL

The Board of Trustees is accountable for the process of risk management and internal controls. Risks are reviewed and identified regularly and appropriate strategies are implemented.

The administrators of the Fund maintain internal controls and systems designed to provide reasonable assurance as to the integrity and reliability of the annual financial statements and to safeguard, verify and maintain accountability for its assets adequately. Such controls are based on established policies and procedures and are implemented by trained personnel with the appropriate segregation of duties.

A formal internal audit function exists within the administrator, with regular reporting to the Audit Committee. The administrators of the Fund have documented and tested disaster recovery procedures and the Board is satisfied that the procedures are in place and tested.

No event or item has come to the attention of the Board of Trustees that indicates any material breakdown in the functioning of the key internal controls and systems during the year under review.

.....
B Jonker
CHAIRPERSON

.....
F Mackenzie
VICE-CHAIRPERSON

.....
PL Wassermann
PRINCIPAL OFFICER

20 April 2023

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REPORT OF THE BOARD OF TRUSTEES

for the year ended 31 December 2022

The Board of Trustees hereby presents its annual report for the year ended 31 December 2022.

1. DESCRIPTION OF THE MEDICAL FUND

1.1 Terms of registration

The Fund is a not for profit restricted medical fund registered in terms of the Medical Schemes Act 131 of 1998 (the Act), as amended.

1.2 Benefit options within the Transmed Medical Fund

The Fund offers the following benefit options to employees and pensioners of Transnet SOC Ltd and its subsidiaries:

- Guardian;
- Link;
- Select; and
- Prime.

2. MANAGEMENT

2.1 Board of Trustees in office during the year under review and at the date of this report:

EMPLOYER AND LABOUR NOMINATED

Mr HF Fourie	
Mr F Mackenzie	Appointed as Vice-Chairperson 20 April 2022
Mr MJ Mamabolo	Resigned 25 January 2022
Ms J Phokane	Appointed 4 May 2022
Mr V Ramlugaan	
Mr L Siwani	
Ms C Sophete	Appointed 4 May 2022

MEMBER ELECTED TRUSTEES

Mr C Beard	
Ms S Booysen	
Mr T Campher	Deceased 12 May 2022
Mr WH Goosen	Deceased 8 August 2022
Mr B Jonker	Appointed as Chairperson 20 April 2022
Mr F Mabaso	

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ANNUAL FINANCIAL STATEMENTS**REPORT OF THE BOARD OF TRUSTEES (continued)
for the year ended 31 December 2022****2.2 Principal Officer**

Mr PL Wassermann 1st Floor Eagle Canyon Office Park Cnr Dolfyn and Christiaan de Wet Street Randparkridge Randburg 2169	Private Bag 32043 Braamfontein 2017
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2.3 Registered Office address and postal address

1st Floor Eagle Canyon Office Park Cnr Dolfyn and Christiaan de Wet Street Randparkridge Randburg 2169	Private Bag 32043 Braamfontein 2017
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2.4 Fund Administrator

Momentum Health Solutions (Pty) Ltd Parc du Cap Mispel Road Bellville 7530	Parc du Cap Mispel Road Bellville 7530
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CMS accreditation no: 13

2.5 Managed care providers

Momentum Health Solutions (Pty) Ltd Parc du Cap Mispel Road Bellville 7530	Parc du Cap Mispel Road Bellville 7530
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CMS accreditation no: 59

Universal Healthcare (Pty) Ltd Universal House 15 Tambach Road Sunninghill Park Sandton 2128	PO Box 1411 Rivonia 2128
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CMS accreditation no: MCO 17

2.6 Investment manager

Ninety One SA Proprietary Limited
36 Hans Strijdom Avenue
Foreshore
Cape Town
8001
FSP Number 587

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REPORT OF THE BOARD OF TRUSTEES (continued) for the year ended 31 December 2022

2.7 Actuaries

NMG Consultants and Actuaries (Pty) Ltd
Belvedere Office Park
Block B
Pasita Street
Tygervalley
7536

PO Box 3950
Tygervalley
7536

2.8 Auditor

Deloitte & Touche
5 Magwa Crescent
Waterfall City
Midrand
2066

Private Bag X6
Gallo Manor
2052

3. INVESTMENT STRATEGY OF THE FUND

The Fund's investment objectives are to maximise the return on its investments on a long-term basis at minimal risk. The investment strategy takes into consideration both constraints imposed by legislation and those imposed by the Board of Trustees.

The Board of Trustees ensure that:

- The Fund remains solvent;
- Investments are placed at minimum risk and at the best possible rate of return;
- Investments made are in compliance with the Regulations of the Act; and
- A risk assessment is performed with feedback to the Board of Trustees with recommendations on the risks identified.

During 2022, the Fund invested in money market instruments, which included bonds and cash instruments. This was done mainly to ensure that the Fund had sufficient liquidity available.

The Fund's policy is reviewed annually, taking into consideration compliance with the Act, risk, returns of the various investment instruments and the surplus of funds available.

4. REVIEW OF THE FINANCIAL YEAR'S ACTIVITIES

4.1 Results from operations

Working Members and Pensioner (WMP) risk pool

The Trustees have implemented the actions stipulated in the business plan in order to increase the reserve ratio of the WMP risk pool in order to reach the required 25%.

The WMP risk pool consists of three options: Link Option, Select Option and the Prime Option. All options exceeded budget expectations at year end.

The risk profile of the risk pool deteriorated further during the year, partially as a result of the implementation of a revised subsidy structure by the employer, which has an ongoing impact on the risk pool. The revised subsidy structure allows members to belong to other open medical schemes, as approved by the employer. The strategic plan of the Fund is to attract new members to the risk pool in order to improve the risk profile.

The reserve ratio for the WMP risk pool increased from 7.74% at 31 December 2021 to 11.31% at 31 December 2022.

The Trustees believe that the risk pool will remain solvent and build reserves during the 2023 benefit year.

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ANNUAL FINANCIAL STATEMENTS**REPORT OF THE BOARD OF TRUSTEES (continued)**

for the year ended 31 December 2022

4. REVIEW OF THE FINANCIAL YEAR'S ACTIVITIES (continued)**4.1 Results from operations (continued)****South African Transport Services (SATS) risk pool**

Transnet SOC Ltd will continue to fund this risk pool.

The SATS risk pool's reserve ratio decreased from 52.60% at 31 December 2021 to 35.66% at 31 December 2022. This decrease is mainly due to the reduced Transnet SOC subsidy, intended to bring the risk pool closer to the 25% solvency requirement. The risk pool performed better than anticipated during 2022.

Transnet SOC Ltd remains committed to fund the SATS risk pool to the reserve level required by the Act.

The Fund

The results of the Fund are set out in the annual financial statements. The reserve ratio decreased from 19.72% at the end of December 2021 to 17.96% at the end of December 2022. Due to the fact that the Fund's reserve ratio is below the required level of 25%, the Fund is currently under financial monitoring by the Council for Medical Schemes. The Fund has regular interactions with the Council for Medical Schemes, and constantly keeps the Council for Medical Schemes informed of developments in the Fund.

4.2 Solvency ratio

	2022	2021
	R	R
Total members' funds	97,150,356	112,369,529
Less:		
Unrealised gains on financial assets at fair value through Profit or Loss	(15,356)	(39,635)
Accumulated funds per Regulation 29	<u>97,134,999</u>	<u>112,329,893</u>
Annual gross contributions	540,760,594	569,553,449
Accumulated funds ratio	<u>17.96%</u>	<u>19.72%</u>

4.3 Going concern

The Board of Trustees considers the Fund to be a going concern. The Board took the following into consideration in the evaluation of the Fund's going concern status:

- Available cash and investments at the end of the year amounted to R 117 620 033.
- Transnet SOC Ltd will be providing funding to ensure that the SATS risk pool maintains a reserve level of 25%.
- A business plan has been developed by the Trustees, with the assistance of the Fund's actuary, in order to get the Fund to a reserve level of 25%.
- It is expected that the Fund's reserve ratio will decrease from 17.96% at 31 December 2022 to 17.61% at 31 December 2023.
- An actuarial model was developed to assist the Trustees to consider the going concern status of the Fund. Even with the most negative assumptions on membership movements and membership risk profiles, the model indicated that the Fund will be a going concern.

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ANNUAL FINANCIAL STATEMENTS**REPORT OF THE BOARD OF TRUSTEES (continued)**

for the year ended 31 December 2022

4. REVIEW OF THE FINANCIAL YEAR'S ACTIVITIES (continued)**4.4 Operational statistics**

	2022				
	Link	Select	Prime	Guardian	Total
Number of members at the end of the accounting period	1,530	9,050	294	4,470	15,344
Average number of members for the accounting period	1,566	9,488	326	4,762	16,142
Number of beneficiaries at the end of the accounting period	2,719	14,595	355	5,124	22,793
Average number of beneficiaries for the accounting period	2,814	15,442	394	5,469	24,118
Average age of beneficiaries for the accounting period	49	51	73	81	58
Pensioner ratio (beneficiaries > 65 years)	34.5%	38.2%	78.0%	97.1%	51.6%
Average net contributions per member per month	R 1,896.68	R 2,832.30	R 8,944.78	R 2,583.85	R 2,791.70
Average net contributions per beneficiary per month	R 1,055.42	R 1,740.26	R 7,407.28	R 2,250.13	R 1,868.48
Average relevant healthcare expenditure per member per month	R 1,473.49	R 2,636.60	R 8,247.76	R 2,643.20	R 2,639.06
Average relevant healthcare expenditure per beneficiary per month	R 819.93	R 1,620.01	R 6,830.07	R 2,301.81	R 1,766.32
Average administration costs per member per month	R 173.95	R 156.26	R 496.48	R 510.37	R 269.32
Average administration cost per beneficiary per month	R 96.80	R 96.01	R 411.14	R 444.45	R 180.25
Average managed care services per member per month	R 102.11	R 69.56	R 208.77	R 117.61	R 89.71
Non-Healthcare expenses per average beneficiary per month	R 97.26	R 96.47	R 413.15	R 446.59	R 181.12
Average accumulated funds per member at 31 December *	WMP = R 4,091			R 11,782	R 6,331
Beneficiaries per member at 31 December	1.8	1.6	1.2	1.1	1.5
Managed care services as a percentage of net contributions	5%	2%	2%	5%	3%
Risk claims as a percentage of net contributions	72%	91%	90%	98%	91%
Administration expenses as a percentage of net contributions	9%	6%	6%	20%	10%
Non-Healthcare expenses as a percentage of net contributions	9%	6%	6%	20%	10%
Return on investments					6.06%

* Accumulated funds are measured for the two risk pools, WMP and SATS, and for the Fund as a whole, but not per benefit option.

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ANNUAL FINANCIAL STATEMENTS**REPORT OF THE BOARD OF TRUSTEES (continued)**

for the year ended 31 December 2022

4. REVIEW OF THE FINANCIAL YEAR'S ACTIVITIES (continued)**4.4 Operational statistics**

	2021				
	Link	Select	Prime	Guardian	Total
Number of members at the end of the accounting period	1,573	10,119	396	5,126	17,214
Average number of members for the accounting period	1,694	10,775	449	5,525	18,443
Number of beneficiaries at the end of the accounting period	2,873	16,644	480	5,908	25,905
Average number of beneficiaries for the accounting period	3,147	17,895	546	6,402	27,989
Average age of beneficiaries for the accounting period	48	50	71	81	57
Pensioner ratio (beneficiaries > 65 years)	33.2%	37.0%	74.4%	96.9%	50.9%
Average net contributions per member per month	R 1,831.80	R 2,614.62	R 7,817.79	R 2,294.12	R 2,573.45
Average net contributions per beneficiary per month	R 986.09	R 1,574.33	R 6,432.50	R 1,979.82	R 1,695.77
Average relevant healthcare expenditure per member per month	R 1,478.16	R 2,495.08	R 7,623.49	R 2,618.81	R 2,563.66
Average relevant healthcare expenditure per beneficiary per month	R 795.72	R 1,502.35	R 6,272.62	R 2,260.03	R 1,689.31
Average administration costs per member per month	R 166.71	R 146.73	R 425.69	R 468.59	R 251.78
Average administration cost per beneficiary per month	R 89.74	R 88.35	R 350.26	R 404.39	R 165.91
Average managed care services per member per month	R 98.63	R 66.81	R 202.06	R 110.78	R 86.20
Non-Healthcare expenses per average beneficiary per month	R 90.11	R 88.69	R 351.78	R 405.96	R 166.55
Average accumulated funds per member at 31 December *	WMP = R 2,675.30			R 15,612.67	R 6,527.80
Beneficiaries per member at 31 December	1.9	1.7	1.2	1.2	1.5
Managed care services as a percentage of net contributions	5%	3%	3%	5%	3%
Risk claims as a percentage of net contributions	76%	93%	95%	110%	97%
Administration expenses as a percentage of net contributions	9%	6%	5%	20%	10%
Non-Healthcare expenses as a percentage of net contributions	9%	6%	5%	21%	10%
Return on investments					4.55%

* Accumulated funds are measured for the two risk pools, WMP and SATS, and for the Fund as a whole, but not per benefit option.

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ANNUAL FINANCIAL STATEMENTS**REPORT OF THE BOARD OF TRUSTEES (continued)**

for the year ended 31 December 2022

4. REVIEW OF THE FINANCIAL YEAR'S ACTIVITIES (continued)**4.5 Reserve accounts**

Movements in the reserves are set out in the statement of changes in funds and reserves.

4.6 Outstanding risk claims

The basis of calculation of the outstanding risk claims provision is discussed in note 6 of the annual financial statements and is consistent with the prior year. There have been no unusual movements that the Trustees believe should be brought to the attention of the members of the Fund.

5. ACTUARIAL SERVICES

The Fund's actuaries have been consulted in the determination of the contribution and benefit levels and provide regular reports to the Fund. Reporting also include the Incurred But Not Reported (IBNR) provision calculation.

6. GUARANTEES RECEIVED BY THE FUND FROM A THIRD PARTY

No guarantees have been received by the Fund for the year ended 31 December 2022.

7. EVENTS AFTER REPORTING DATE

There have been no events that have occurred between the end of the accounting period and the date of the approval of these annual financial statements that the Trustees consider should be brought to the attention of the members of the Fund.

8. INVESTMENTS IN AND LOANS TO PARTICIPATING EMPLOYERS OF MEMBERS OF THE MEDICAL FUND AND TO OTHER RELATED PARTIES

- The Fund holds no investments in participating employers of the Fund's members;
- Refer to the related party disclosure in note 15 of the annual financial statements; and
- Trustee remuneration is disclosed in note 11.1 of the annual financial statements.

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ANNUAL FINANCIAL STATEMENTS**REPORT OF THE BOARD OF TRUSTEES (continued)****for the year ended 31 December 2022****9. MANAGEMENT OF INSURANCE RISK**

The primary insurance activity carried by the Fund assumes the risk of loss from members and their dependants that are directly subject to the risk. The risk relates to the health of the Fund members. As such the Fund is exposed to the uncertainty surrounding the timing and severity of claims under contract.

The Fund manages its insurance risk through benefit limits and sub-limits, approval procedures for transactions that involves pricing guidelines, pre-authorisation and case management and service provider profiling.

The Fund uses several methods to assess and monitor insurance risk exposures both for individual types of risks insured and overall risks. The theory of probability is applied to pricing and provision for portfolio of insurance contracts. The principal risk is that the frequency and severity of risk claims are greater than expected.

Insurance events are, by their nature, random, and the actual number and size of events during any one year may vary from those estimated with established statistical techniques. There are no changes to assumptions used to measure insurance assets and liabilities that have a material effect on the annual financial statements and there are no terms and conditions of insurance contracts that have a material effect on the amount, timing and uncertainty of the Fund's cash flows.

10. AUDIT COMMITTEE

The Audit Committee was established in accordance with the provisions of the Act. The Committee is mandated by the Board of Trustees by means of written terms of reference as to its membership, authority and duties. The Committee consists of five members of which two are members of the Board of Trustees. The majority of the members, including the Chairperson, are not officers of the Fund or its third party administrator. The Committee met on two occasions during the course of the year.

The Principal Officer of the Fund, Momentum Health Solutions management, the external auditors and the internal auditors attend all Audit Committee meetings and have unrestricted access to the Chairperson of the Committee.

In accordance with the provisions of the Act, the primary responsibility of the Committee is to assist the Board of Trustees in carrying out its duties relating to the Fund's accounting policies, risk management, internal control systems and financial reporting practices. The external and internal auditors formally report to the Committee on critical findings arising from audit activities.

The Committee presently comprises:

Mr C Beard
Mr K Buthelezi (Chairperson)
Mr G Hauptfleisch
Mr F Mackenzie
Ms S Thomas

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ANNUAL FINANCIAL STATEMENTS**REPORT OF THE BOARD OF TRUSTEES (continued)****for the year ended 31 December 2022****11. TRUSTEE MEETING ATTENDANCE**

The following schedule sets out Board of Trustees meeting attendances. Trustee remuneration is disclosed in note 11.1 to the financial statements.

Trustee/Sub-Committee member	Board Meetings		Audit Committee		Benefits Committee		Ex-Gratia Committee		Management Committee		Remuneration Committee	
	A	B	A	B	A	B	A	B	A	B	A	B
C Beard	4	4	2	2	4	4	10	9	7	7		
S Booyesen	4	4			4	4	10	9	7	7		
T Campher*	2	2			1	1	4	4	2	2		
HF Fourie	4	4										
W Goosen**	2	2			2	1	5	3	4	2		
B Jonker	4	4			4	4	10	10	7	7	2	2
F Mabaso	4	4							7	7		
F Mackenzie	4	4	2	2	4	4	10	10	7	7	2	2
J Mamabolo***	0	0										
J Phokane****	2	2										
V Ramlugaan	4	4										
L Siwani	4	4					10	8	7	7		
C Sophete****	2	2										

A - Is the number of meetings held during the year

B - Is the number of meetings attended

* Trustee deceased 12 May 2022

** Trustee deceased 8 August 2022

*** Trustee resigned 25 January 2022

**** Trustee appointed 4 May 2022

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ANNUAL FINANCIAL STATEMENTS

REPORT OF THE BOARD OF TRUSTEES (continued)

for the year ended 31 December 2022

12. BOARD OF TRUSTEE COMMITTEE MEETINGS

12.1 Management Committee

The Management Committee is mandated by the Board of Trustees by means of written terms of reference as to its membership, authority and duties.

The Management Committee incorporates the functions and responsibilities in the following areas:

- Financial and investment management;
- Suppliers' management;
- Marketing management; and
- Managed care management.

12.2 Benefits Committee

The mandate of the Benefits Committee is:

- To make recommendations to the Board on the benefits that are offered to members; and
- To ensure long-term viability of the benefit options.

12.3 Remuneration Committee

The mandate of the Remuneration Committee is to:

- Do annual performance appraisals for the employee of the Fund; and
- Decide on annual increases in the remuneration for the employee of the Fund.

12.4 Ex-gratia Committee

The Ex-gratia Committee approved applications to the value of R207 079 (2021: R197 422), for ex-gratia assistance to members. Applications for assistance from members are evaluated against criteria as approved by the Board from time to time.

13. NON-COMPLIANCE WITH MEDICAL SCHEMES ACT 131 OF 1998

13.1 Outstanding contributions

Nature and impact

In terms of Section 26(7) of the Act, contributions should be received in accordance with the rules of the Fund. Per the Fund rules, contributions are required to be received at least three days after their due date. Instances were noted where contributions were received late.

Causes for the failure

The reason for this is due to the inherent nature of the business.

Corrective action

On-going communication to employer groups has occurred. The Fund also applied annually to the Council for Medical Schemes and obtained an exemption for the three day contribution rule.

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ANNUAL FINANCIAL STATEMENTS

REPORT OF THE BOARD OF TRUSTEES (continued)

for the year ended 31 December 2022

13. NON-COMPLIANCE WITH MEDICAL SCHEMES ACT 131 OF 1998 (continued)

13.2 Self-supporting options

Nature and impact

In terms of Section 33(2) benefit options shall be self-supporting in terms of membership and financial performance. The Guardian Option recorded a deficit for the year ended 31 December 2022.

Causes for the failure

The deficit generated during the year is mainly due to the reduced Transnet SOC subsidy, intended to bring the risk pool closer to the 25% solvency requirement.

Corrective action

The agreement with Transnet to ensure that the SATS pool reserve levels does not fall below 25%, has been renewed. A Business Plan to get the Fund's reserve levels to 25% has been updated.

13.3 Reserve ratio

Nature and impact

In terms of Regulation 29, a medical scheme should have reserves of at least 25% of its gross annual contributions. At 31 December 2022, the Fund had a reserve ratio of 17.96%, which is lower than the required level.

Causes for the failure

The working member and pensioner risk profile deteriorated during the year. Further to this, Transnet SOC reduced its subsidy for the Guardian Option, intended to bring the risk pool closer to the 25% solvency requirement.

Corrective action

A business plan was developed by the Trustees, with the assistance of the Fund's actuary in order to restore the Fund's reserve levels back to 25%. The Council for Medical Schemes approved the business plan.

13.4 Payment of claims within 30 days

Nature and impact

In terms of Section 59(2) a member or provider claim should be settled within 30 days of submission. Instances were noted during sample testing where settlements took more than 30 days.

Causes of failure

Delays can occur when accounts are referred for clinical audit or other investigations. These are however the exceptions, and claims are generally paid within the prescribed time.

Corrective action

The administrator is aware of the requirements and comply as far as possible. It is however an inherent part of the industry that a limited number of problematic claims may exceed the payment requirement of 30 days.

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ANNUAL FINANCIAL STATEMENTS**STATEMENT OF FINANCIAL POSITION**

as at 31 December 2022

	Notes	2022 R	2021 R
ASSETS			
Non-current assets		63,787,492	63,279,277
Equipment	2	36,945	72,120
Financial assets at fair value through Profit or Loss	3	63,750,546	63,207,157
Current assets		69,407,989	90,885,375
Financial assets at fair value through Profit or Loss	3	51,056,679	80,033,819
Trade and other receivables	4	15,538,501	7,180,051
Cash and cash equivalents	5	2,812,808	3,671,505
Total assets		<u>133,195,480</u>	<u>154,164,652</u>
FUNDS AND LIABILITIES			
Members' funds		97,150,356	112,369,529
Accumulated funds		97,150,356	112,369,529
Current liabilities		36,045,124	41,795,123
Outstanding risk claims provision	6	20,957,546	22,437,439
Trade and other payables	7	15,087,578	19,357,684
Total funds and liabilities		<u>133,195,480</u>	<u>154,164,652</u>

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ANNUAL FINANCIAL STATEMENTS**STATEMENT OF COMPREHENSIVE INCOME**

For the year ended 31 December 2022

	Notes	2022 R	2021 R
Contribution income	8	540,760,594	569,553,449
Relevant healthcare expenditure		(511,193,992)	(567,385,911)
Risk claims incurred	9	(494,052,739)	(550,341,932)
Managed care services	10	(17,376,463)	(19,076,990)
Third party claims recoveries		235,210	2,033,011
Gross healthcare result		29,566,602	2,167,538
Administration expenditure	11	(52,167,847)	(55,723,151)
Net impairment loss on healthcare receivables	12	(251,717)	(216,156)
Net healthcare result		(22,852,962)	(53,771,768)
Other income		7,786,020	7,637,341
Investment income	13	7,543,740	7,406,215
Sundry income	14	242,280	231,126
Other expenditure		(152,231)	(203,645)
Asset management fees		(127,952)	(170,759)
Unrealised loss on investments at fair value through Profit or Loss		(24,279)	(32,886)
Deficit for the year		(15,219,173)	(46,338,072)

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ANNUAL FINANCIAL STATEMENTS**STATEMENT OF CHANGES IN FUNDS AND RESERVES**

For the year ended 31 December 2022

	Accumulated funds R	Total members' funds R
Balance as at 1 January 2021	158,707,601	158,707,601
Deficit for the year	(46,338,072)	(46,338,072)
Balance as at 31 December 2021	<u>112,369,529</u>	<u>112,369,529</u>
Balance as at 1 January 2022	112,369,529	112,369,529
Deficit for the year	(15,219,173)	(15,219,173)
Balance as at 31 December 2022	<u>97,150,356</u>	<u>97,150,356</u>

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ANNUAL FINANCIAL STATEMENTS**STATEMENT OF CASH FLOWS**

For the year ended 31 December 2022

	Notes	2022 R	2021 R
CASH FLOWS FROM OPERATING ACTIVITIES			
Cash receipts from members and providers		397,469	14,030
Cash receipts from members - contributions		532,197,413	578,616,248
Cash paid to providers, employees and members - claims		(516,976,084)	(576,536,236)
Cash paid to providers, employees and members - non-healthcare expenditure		<u>(52,429,467)</u>	<u>(56,303,045)</u>
NET CASH FLOW FROM OPERATING ACTIVITIES		(36,810,671)	(54,209,003)
CASH FLOWS FROM INVESTING ACTIVITIES			
Additions to equipment	2	(1,239)	(29,159)
Additions to financial assets at fair value through Profit or Loss	3	(266,365,000)	(355,405,000)
Proceeds on disposal of financial assets at fair value through Profit or Loss	3	301,975,000	407,935,000
Management fees and transaction costs	3	35,385	44,118
Interest received		307,826	159,569
NET CASH FLOW FROM INVESTING ACTIVITIES		<u>35,951,973</u>	<u>52,704,528</u>
NET DECREASE IN CASH AND CASH EQUIVALENTS		(858,698)	(1,504,475)
Cash and cash equivalents at beginning of year		3,671,505	5,175,980
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	5	<u><u>2,812,808</u></u>	<u><u>3,671,505</u></u>

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****1. PRINCIPAL ACCOUNTING POLICIES**

The principal accounting policies applied in the preparation of the annual financial statements are set out below and are in accordance with International Financial Reporting Standards (IFRS). These policies have been consistently applied to all years presented, except for changes required by the mandatory adoption of new, revised IFRS and changes in accounting policy.

1.1 Basis of preparation

The annual financial statements are prepared in accordance with IFRS. IFRS comprise International Financial Reporting Standards, International Accounting Standards (IAS) and the interpretations originated by the International Financial Reporting Interpretations Committee (IFRIC) or the former Standing Interpretations Committee (SIC). The standards referred to are set by the International Accounting Standards Board (IASB). The annual financial statements are prepared on a going concern basis using the historical cost convention, except for financial assets, which are carried at fair value.

Use of estimates

The preparation of the financial statements necessitates the use of estimates and assumptions. These estimates and assumptions affect the reported amount of assets, liabilities and contingent liabilities at the reporting date as well as affecting the reported income and expenditure for the year. The actual outcome may differ from these estimates. For further information on critical estimates and judgements refer to note 19.

The following standards, amendments to standards, improvements and interpretations are relevant but not effective for the Fund:

Effective date	Standard, amendment, improvement or interpretation	Summary of requirements
Effective for annual periods beginning on or after 1 January 2023	Amendment to IFRS 17 - Insurance contracts	IFRS 17 will impact the measurement of the contracts with members in the Fund's financial statements. The Fund will qualify for the premium allocation approach which requires the Fund to recognise a liability for remaining coverage (with reference to the premiums received) and liability for incurred claims (calculated as the expected cash outflows and a risk adjustment). The Fund expects that the boundary of the contracts with members will be one year. The Fund will be required to assess for onerous contracts at the point members elect the benefit option for the following year.

The Fund shall adopt the standards, interpretations or amendments on their effective date.

Once effective, IFRS 17 will replace IFRS 4 Insurance Contracts (IFRS 4) that was issued in 2005. IFRS 17 applies to all types of insurance contracts (i.e., life, non-life, direct insurance and re-insurance), regardless of the type of entities that issue them, as well as to certain guarantees and financial instruments with discretionary participation features. The overall objective of IFRS 17 is to provide an accounting model for insurance contracts that is more useful and consistent for insurers. Refer to note 27 for the potential impact of the standard on the Fund.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****1. PRINCIPAL ACCOUNTING POLICIES (continued)****1.2 Financial instruments**

Classification

The Fund classifies its financial assets into the following categories: at fair value through profit or loss, at fair value through other comprehensive income and amortised cost. The classification depends on the purpose for which the financial assets were acquired. Management determines the classification of its financial assets at initial recognition.

(a) Financial assets at fair value through profit or loss

Debt investments that do not qualify for measurement at either amortised cost or fair value through other comprehensive income.

Equity investments that are held for trading and equity investments for which the entity has not elected to recognise fair value gains and losses through OCI.

Assets that do not meet the criteria for amortised cost or FVOCI are measured at FVTPL. A gain or loss on a debt investment that is subsequently measured at FVTPL is recognised in profit or loss and presented net within other gains/(losses) in the period in which it arises.

(b) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They are included in current assets, except for maturities greater than 12 months after the end of the reporting period. These are classified as non-current assets. The Fund's loans and receivables comprise 'trade and other receivables' in the statement of financial position. Trade receivables are recognised initially at the amount of consideration that is unconditional unless they contain significant financing components, when they are recognised at fair value. The Fund holds the trade receivables with the objective to collect the contractual cash flows and therefore measures them subsequently at amortised cost using the effective interest method.

(c) Amortised cost

Assets that are held for collection of contractual cash flows where those cash flows represent solely payments of principal and interest are measured at amortised cost. Interest income from these financial assets is included in finance income using the effective interest rate method. Any gain or loss arising on derecognition is recognised directly in profit or loss and presented in other gains/(losses) together with foreign exchange gains and losses. Impairment losses are presented as a separate line item in the statement of comprehensive income.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****1. PRINCIPAL ACCOUNTING POLICIES (continued)****Recognition and initial measurement**

At initial recognition, the Fund measures a financial asset at its fair value plus, in the case of a financial asset not at fair value through profit or loss (FVPL), transaction costs that are directly attributable to the acquisition of the financial asset. Transaction costs of financial assets carried at FVPL are expensed in profit or loss.

Regular way purchases and sales of financial assets are recognised on trade-date, the date on which the Fund commits to purchase or sell the asset. Financial assets are derecognised when the rights to receive cash flows from the financial assets have expired or have been transferred and the Fund has transferred substantially all the risks and rewards of ownership.

Financial assets with embedded derivatives are considered in their entirety when determining whether their cash flows are solely payment of principal and interest.

Subsequent measurement

Despite the foregoing, the Fund may make the following irrevocable election/designation at initial recognition of a financial asset:

The Fund may irrevocably elect to present subsequent changes in fair value of an equity investment that is neither held for trading nor contingent consideration recognised by an acquirer in a business combination in other comprehensive income; and

The Fund may irrevocably designate a debt investment that meets the amortised cost or FVTOCI criteria as measured at FVTPL if doing so eliminates or significantly reduces an accounting mismatch.

Derecognition

When a debt investment measured at FVTOCI is derecognised, the cumulative gain or loss previously recognised in other comprehensive income is reclassified from equity to profit or loss as a reclassification adjustment. When an equity investment designated as measured at FVTOCI is derecognised, the cumulative gain or loss previously recognised in other comprehensive income is subsequently transferred to retained earnings.

Debt instruments

Subsequent measurement of debt instruments depends on the Fund's business model for managing the asset and the cash flow characteristics of the asset.

Trade and other receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They are included in current assets, except for maturities greater than 12 months after the end of the reporting period. These are classified as current assets. The Fund's financial instruments at amortised cost comprises 'trade and other receivables' and 'cash and cash equivalents' in the statement of financial position. Trade receivables are recognised initially at the amount of consideration that is unconditional unless they contain significant financing components, when they are recognised at fair value. The Fund holds the trade receivables with the objective to collect the contractual cash flows and therefore measures them subsequently at amortised cost using the effective interest method.

Cash and cash equivalents

Cash and cash equivalents comprise current accounts and deposits held on call with banks. Cash and cash equivalents are subsequently measured at amortised cost.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

For the year ended 31 December 2022

1. PRINCIPAL ACCOUNTING POLICIES (continued)**Impairment of financial assets**

Debt instruments that are measured subsequently at amortised cost are subject to impairment. In relation to the impairment of financial assets an expected credit loss model is required. The expected credit loss model requires the Fund to account for expected credit losses and changes in those expected credit losses at each reporting date to reflect changes in credit risk since initial recognition of the financial assets. In other words, it is no longer necessary for a credit event to have occurred before credit losses are recognised.

The Fund recognises a loss allowance for expected credit losses on:

- (1) Debt investments measured subsequently at amortised cost;
- (2) Trade receivables and contract assets; and
- (3) Financial guarantee contracts to which the impairment requirements of IFRS 9 apply.

The Fund measures the loss allowance for a financial instrument at an amount equal to the lifetime expected credit losses (ECL) if the credit risk on that financial instrument has increased significantly since initial recognition, or if the financial instrument is a purchased or originated credit impaired financial asset. However, if the credit risk on a financial instrument has not increased significantly since initial recognition (except for a purchased or originated credit impaired financial asset), the Fund is required to measure the loss allowance for that financial instrument at an amount equal to 12 months ECL.

IFRS 9 also requires a simplified approach for measuring the loss allowance at an amount equal to lifetime ECL for trade receivables, contract assets and lease receivables in certain circumstances.

Insurance payables

Insurance payables are initially measured at fair value (which approximates cost), and are subsequently measured at amortised cost, using the effective interest method.

Derecognition of assets or financial liabilities

The Fund derecognises a financial asset when the contractual rights to the cash flows from the asset expire, or it transfers the rights to receive the contractual cash flows in a transaction in which substantially all the risks and rewards of ownership of the financial asset are transferred. Any interest in such transferred financial assets that is created or retained by the Fund is recognised as a separate asset or liability.

Where the Fund neither transfers nor retains substantially all the risks and rewards of ownership of the financial asset, the Fund determines whether it has retained control of the financial asset. In this case:

- (i) If the Fund has not retained control, it derecognises the financial asset and recognises separately as assets or liabilities any rights and obligations created or retained in the transfer; and
- (ii) If the Fund has retained control, it continues to recognise the financial asset to the extent of its continuing involvement in the financial asset.

The Fund derecognises a financial liability when its contractual obligations are discharged, cancelled or expire.

Offsetting of financial instruments

Financial assets and liabilities are offset and the net amount presented in the statement of financial position when, and only when, the Fund has a current legal right to offset the amounts and intends either to settle on a net basis or to realise the asset and settle the liability simultaneously.

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ANNUAL FINANCIAL STATEMENTS

NOTES TO THE FINANCIAL STATEMENTS

For the year ended 31 December 2022

1. PRINCIPAL ACCOUNTING POLICIES (continued)

1.3 Equipment

Equipment is reflected at historical cost less accumulated depreciation and accumulated impairments. Depreciation is charged on the straight-line basis over the estimated useful lives of the assets after taking into consideration the assets' residual value.

The estimated useful lives of equipment are as follows:

Computer equipment

- | | |
|------------|---------|
| - Hardware | 3 years |
| - Software | 2 years |

Electronic equipment 6 years

Furniture and fittings 6 years

The useful lives, depreciation methods and residual values are reviewed annually at the reporting date and adjusted if appropriate.

Maintenance and repairs are expensed as incurred. Subsequent expenditure is capitalised only when it is probable that the future economic benefits associated with the expenditure will flow to the Fund.

Gains and losses on disposal of an item of equipment are determined by comparing the proceeds from disposal with its carrying amount. Gains and losses on the disposal of equipment is recognised in profit or loss.

Where components of an item of equipment have different useful lives they are accounted for as separate items.

1.4 Provisions

Provisions are recognised when the Fund has a present legal or constructive obligation as a result of past events, for which it is probable that an outflow of economic benefits will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation.

Outstanding risk claims provision

Outstanding risk claims comprise provisions for the Fund's estimate of the ultimate cost of settling all risk claims incurred but not yet reported at the reporting date. Risk claims outstanding are determined as accurately as possible based on a number of factors, which include previous experience in risk claims pattern, risk claims settlement patterns, changes in the nature and number of members according to gender and age, trends in risk claims frequency, changes in the risk claims processing cycle, and variations in the nature and average cost incurred per claim. The Fund does not discount its provision for outstanding risk claims since the effect of the time value of money is not considered material.

1.5 Insurance contracts

Contracts under which the Fund accepts significant insurance risk from another party (the member) by agreeing to compensate the member or other beneficiary if a specified uncertain future event (the insured event) adversely affects the member or other beneficiary are classified as insurance contracts. Contracts issued compensate the Fund's members for health care expenses incurred.

1.6 Contribution income

Contributions on member insurance contracts are accounted for monthly when their collection in terms of the insurance contract is reasonably certain. Contributions represent gross contributions as the Fund does not have a savings account facility. The earned portion of contributions received is recognised as revenue. Contributions are earned from the date of inception of risk, over the indemnity period on a straight-line basis.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

For the year ended 31 December 2022

1. PRINCIPAL ACCOUNTING POLICIES (continued)**1.7 Risk claims**

Gross claims incurred comprise all claims arising from healthcare events that have occurred in the year and for which the Fund is responsible in terms of its registered rules, whether or not reported by the end of the year.

Net risk claims incurred comprise:

- Claims submitted and accrued for services rendered during the year, net of recoveries from members for co-payments and after taking into account recoveries from third parties and discounts received from service providers;
- Claims for services rendered during the previous year not included in the outstanding risk claims provision for that year, net of recoveries from member for co-payments;
- Over or under provision relating to prior year risk claims accruals; and
- Risk claims incurred but not yet reported.

1.8 Investment income

Interest income is recognised using the effective interest rate method, taking account of the principal outstanding and the effective rate over the period to maturity, when it is determined that such income will accrue to the Fund.

Realised gains or losses on disposal of financial assets at FVTPL are recognised in surplus or deficit as investment income.

1.9 Relevant healthcare expenditure

Relevant healthcare expenditure consists of risk claims incurred, managed care services and third party claims recoveries. Managed care services represent the amounts paid or payable to third party administrators, related parties and other third parties for managing the utilisation, costs and quantity of healthcare services to the Fund. These fees are expensed as incurred.

1.10 Liabilities and related assets under the liability adequacy test

The liability for insurance contracts is tested for adequacy by discounting current estimates of all future contractual cash flows, and comparing this amount to the carrying value of the liability net of any related assets. Where a shortfall is identified, an additional provision is made and the Fund recognises the deficiency in surplus or deficit for the year.

1.11 Allocation of income and expenditure to benefit options

The following items are directly allocated to benefit options:

- Contribution income; and
- Risk claims incurred.

The remaining items are apportioned based on a percentage split calculated by the Fund's management.

- Managed care services;
- Administration fees;
- Impairment and recoveries on receivables;
- Sundry income; and
- Asset management fees.

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For the year ended 31 December 2022

2. EQUIPMENT

	Computer equipment R	Electronic equipment R	Furniture & fittings R	Total R
Year ended 31 December 2022				
Cost				
At the beginning of the year	236,597	141,869	22,800	401,266
Additions	1,239	-	-	1,239
At the end of the year	237,836	141,869	22,800	402,505
Accumulated depreciation				
At the beginning of the year	(195,787)	(112,413)	(20,946)	(329,146)
Depreciation charge	(28,217)	(7,031)	(1,166)	(36,414)
At the end of the year	(224,004)	(119,444)	(22,112)	(365,560)
Carrying amount at the end of the year	13,832	22,425	688	36,945

	Computer equipment R	Electronic equipment R	Furniture & fittings R	Total R
Year ended 31 December 2021				
Cost				
At the beginning of the year	214,859	141,869	22,800	379,528
Additions	29,159	-	-	29,159
Disposals	(7,421)	-	-	(7,421)
At the end of the year	236,597	141,869	22,800	401,266
Accumulated depreciation				
At the beginning of the year	(154,087)	(105,382)	(19,779)	(279,248)
Depreciation charge	(49,121)	(7,031)	(1,167)	(57,319)
Disposals reversed	7,421	-	-	7,421
At the end of the year	(195,787)	(112,413)	(20,946)	(329,146)
Carrying amount at the end of the year	40,810	29,456	1,854	72,120

The carrying amounts of equipment can be reconciled as follows:

	Computer equipment R	Electronic equipment R	Furniture & fittings R	Total R
2022				
Net carrying value at beginning of the year	40,810	29,456	1,854	72,120
Additions	1,239	-	-	1,239
Depreciation	(28,217)	(7,031)	(1,166)	(36,414)
Net carrying value at the end of the year	13,832	22,425	688	36,945
2021				
Net carrying value at beginning of the year	60,772	36,487	3,021	100,280
Additions	29,159	-	-	29,159
Disposals	(7,421)	-	-	(7,421)
Depreciation	(49,121)	(7,031)	(1,167)	(57,319)
Disposals reversed	7,421	-	-	7,421
Net carrying value at the end of the year	40,810	29,456	1,854	72,120

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****3. FINANCIAL ASSETS AT FAIR VALUE THROUGH PROFIT OR LOSS**

	2022	2021
	R	R
Fair value of investments at the beginning of the year	143,240,976	188,601,336
Additions	266,365,000	355,405,000
Disposals	(301,975,000)	(407,935,000)
Capitalised interest	7,231,574	7,263,042
Realised and unrealised gain on financial assets at fair value through Profit or Loss	(19,939)	(49,284)
Management fees and transaction costs	(35,385)	(44,118)
	<u>114,807,226</u>	<u>143,240,976</u>
Fair value of investments at the end of the year	<u>114,807,226</u>	<u>143,240,976</u>
Total financial assets at fair value through profit or loss		
Non-current	63,750,546	63,207,157
Current	<u>51,056,679</u>	<u>80,033,819</u>
	<u>114,807,226</u>	<u>143,240,976</u>
Investments are summarised as follows:		
Money market instruments	97,129,024	124,635,571
Bonds	<u>17,678,202</u>	<u>18,605,405</u>
	<u>114,807,226</u>	<u>143,240,976</u>

Financial assets at fair value through Profit or Loss consists of money market instruments and bonds. A detailed register of investments is available for inspection at the registered office of the Fund. The maturity of the underlying instruments are disclosed on page 50 of the financial statements.

The weighted average interest rate received on the money market portfolio was 6.06% (2021: 4.55%).

4. TRADE AND OTHER RECEIVABLES

	2022	2021
	R	R
<i>Insurance receivables</i>		
Contributions outstanding	15,026,040	6,462,859
Member and provider debt	<u>309,068</u>	<u>449,320</u>
	15,335,108	6,912,179
Less: Allowance for expected credit losses		
Opening balance	(37,765)	(29,678)
Movement during the year	(256,977)	(234,473)
Impairment loss recognised during the year	<u>212,197</u>	<u>226,386</u>
Closing balance	(82,545)	(37,765)
<i>Loans and receivables</i>		
Sundry accounts receivable	197,927	173,634
Prepaid expenses	<u>88,011</u>	<u>132,003</u>
	<u>15,538,501</u>	<u>7,180,051</u>

The Fund establishes an allowance for impairment that represents its estimate of expected credit losses (IFRS9) in respect of insurance receivables. The collective loss allowance is determined based on asset policy, while bearing in mind historical data of payment statistics for similar financial assets.

The provision for impairment at 31 December 2022 was determined in accordance with the guidelines of the simplified approach (life time expected losses) of the expected credit loss model as required by IFRS9. It is in respect of contributions receivable as well as member and service provider debit balances recoverable by management. In order for the Fund to determine lifetime expected losses, a provision matrix was used. The provision matrix is based on historical observed default rates, adjusted for forward looking estimates. At every reporting date, the historical observed rates are updated.

The carrying amounts of trade and other receivables approximate their fair values due to the short-term maturities of these assets. The estimated future cash flow receipts have not been discounted as the effect would be immaterial.

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5. CASH AND CASH EQUIVALENTS

	2022	2021
	R	R
Current accounts	2,812,808	3,671,505
	<u>2,812,808</u>	<u>3,671,505</u>

The weighted average effective interest rate on the Fund's current accounts was 2.73% (2021: 0.72%).

The carrying amounts of cash and cash equivalents approximate their fair values due to the short-term maturities of these assets.

6. OUTSTANDING RISK CLAIMS PROVISION

	2022	2021
	R	R
Provision for outstanding risk claims	20,957,546	22,437,439
Analysis of movements in outstanding risk claims		
Balance at beginning of year	22,437,439	23,492,980
Payments in respect of prior year	(20,100,449)	(18,027,489)
(Under)/over provision in respect of prior years (note 9)	2,336,990	5,465,491
Adjustment for current year	18,620,556	16,971,948
Balance at end of year	<u>20,957,546</u>	<u>22,437,439</u>

Process used to determine the assumptions

The process used to determine the assumptions is intended to result in neutral estimates of the most likely or expected outcome. The sources of data used as inputs for the assumptions are internal, using detailed studies that are carried out monthly. There is more emphasis on current trends, and where in early years there is insufficient information to make a reliable best estimate of claims development, prudent assumptions are used.

Each notified risk claim is assessed on a separate, case by case basis with due regard to the claim circumstances, information available from managed care: management services and historical evidence of the size of similar risk claims. The provisions are based on information currently available. However, the ultimate liabilities may vary as a result of subsequent developments. The impact of many of the items affecting the ultimate costs of the loss is difficult to estimate. The provision estimation difficulties are further complicated by risk claims complexity, volume of risk claims, the severity of risk claims, determining the occurrence date of claim and reporting lags.

The cost of outstanding risk claims is estimated using run-off triangles. Such methods extrapolate the development of paid and incurred risk claims, average cost per risk claims and ultimate risk claim numbers for each year based upon observed development of earlier years and expected loss ratios. Run-off triangles are used in situations where it takes time after the treatment date until the full extent of the risk claims to be paid is known. It is assumed that payments will emerge in a similar way in each service month. The proportional increase in the known cumulative payments from one development month to the next can then be used to calculate payments for future development months. The Fund's actuarial consultant also calculated the provision using the Bornhuetter-Ferguson (BF) Method to confirm the accuracy of the provision.

The method used is consistent with prior years and considered and observed historical risk claims development. To the extent that these methods use historical risk claims development information they assume that the historical risk claims development pattern will occur again in the future. There are reasons why this may not be the case, which, insofar as they can be identified, have been allowed for by modifying the method. Such reasons include:

- Economic, legal, political and social trends (resulting in different than expected levels of inflation and/or minimum medical benefits to be provided);
- Changes in composition of members and their dependants; and
- Random fluctuations, including the impact of large losses.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

For the year ended 31 December 2022

6. OUTSTANDING RISK CLAIMS PROVISION (continued)**Assumptions**

The assumptions that have the greatest effect on the measurement of the outstanding risk claims provision are the expected percentages of risk claims settled after each of the first four months of the risk claims run-off period, before the risk claims turn stale.

The percentages used as assumptions are listed in the table below. The table also outlines the sensitivity of these percentages, and the impact on the Fund's liabilities if an incorrect assumption is used.

Other assumptions:

- The actual demographics of the Fund were used including all membership movements for the period.
- The effect of ageing of the population on the utilisation of health services is automatically incorporated.
- The impact on new technology and the depreciation of the Rand were taken into account.

The assumed percentages of risk claims settled at the end of the period:

Risk claims settled for services rendered in:	2022 %	2021 %
December	31.8%	36.2
November	87.1%	84.7
October	95.4%	95.6
September	97.8%	98.0
August and prior	99.5%	99.4

The impact on profit or loss of the sensitivity of these percentages are illustrated below:	2022 R	2021 R
Effect of a 1% point change in assumptions used	2 223 170	2,156,541
Effect of a 2% point change in assumptions used	4 401 464	4,420,164
Effect of a 3% point change in assumptions used	6 536 229	6,803,451

This analysis is prepared for a change in a specific variable, namely risk claims outstanding at the end of each month, with other assumptions remaining constant.

The Fund believes that the liability for risk claims reported in the statement of financial position is adequate. However, it recognises that the process of estimation is based upon certain variables and assumptions which could differ when risk claims arise.

7. TRADE AND OTHER PAYABLES

	2022 R	2021 R
Insurance liabilities	8,970,654	13,272,852
Reported claims not yet paid - Momentum Health Solutions	8,212,480	12,803,423
Reported claims not yet paid - Denis and PPN	758,174	469,429
Financial liabilities		
Other payables and accrued expenses	6,116,924	6,084,832
	<u>15,087,578</u>	<u>19,357,684</u>

The carrying amounts of trade and other payables approximate their fair values due to the short-term maturities of these liabilities.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

For the year ended 31 December 2022

8. CONTRIBUTION INCOME

	2022	2021
	R	R
Gross contributions	540,760,594	569,553,449
	<u>540,760,594</u>	<u>569,553,449</u>

9. RISK CLAIMS INCURRED

Current year risk claims	475,432,183	533,369,984
Movement in outstanding risk claims provisions:	18,620,556	16,971,948
- Adjustment for current year (note 6)	20,957,546	22,437,439
- Over provision in respect of prior years (note 6)	(2,336,990)	(5,465,491)
	<u>494,052,739</u>	<u>550,341,932</u>

10. MANAGED CARE SERVICES

Active disease risk management services	3,085,934	3,395,563
Disease risk management support services	771,923	849,396
Hospital benefit management services	5,137,950	5,654,552
Network management services	3,735,050	4,062,901
Pharmacy benefit management services	4,645,606	5,114,578
	<u>17,376,463</u>	<u>19,076,990</u>

11. ADMINISTRATION EXPENSES

Actuarial and consulting fees	2,794,157	2,673,860
Administrator's fees	34,849,599	38,168,322
Association fees	274,325	265,192
Audit fee	1,237,800	1,184,500
Audit committee fees	188,669	277,927
Bank charges	334,754	355,164
Benefit management services	332,290	368,720
Communication and other office expenses	838,901	869,420
Depreciation	36,414	57,319
Fidelity guarantee and professional indemnity insurance premium	143,662	118,175
Lease rentals	890,722	1,057,232
Marketing	1,634,747	1,454,602
Other expenses	193,761	133,039
Personnel expenditure	710,353	982,255
Principal Officer's fees and expenses	5,037,661	4,820,152
Registrar's levies	758,944	878,662
Travel and accommodation	149,299	85,576
Trustee elections	-	530,329
Trustees' remuneration and consideration expenses (Note 11.1)	1,761,790	1,442,705
	<u>52,167,847</u>	<u>55,723,151</u>

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****11. ADMINISTRATION EXPENSES (continued)****11.1 Trustees' remuneration and consideration expenses - 2022**

Name	Fees for meeting attendance R	Fees for holding office R	Travel and accommodation R	Conference fees R	Telephone allowance R	Total R
Mr C Beard	122,904	29,060	25,833	-	-	177,797
Ms S Booysen	121,239	29,060	100,798	-	5,400	256,497
Mr T Campher	36,467	14,114	6,885	-	1,800	59,266
Mr HF Fourie	30,451	29,060	2,968	-	-	62,479
Mr WH Goosen	32,938	14,114	39,477	-	3,150	89,679
Mr B Jonker	155,271	36,438	156,435	-	5,400	353,544
Mr F Mabaso	68,097	29,060	109,898	-	-	207,055
Mr F Mackenzie	155,914	36,026	77,611	-	5,400	274,951
Ms J Phokane	18,687	7,473	6,742	-	1,800	34,702
Mr V Ramlugaan	-	-	14,542	-	-	14,542
Mr L Siwani	97,369	29,060	64,748	-	5,400	196,577
Ms C Sophete	18,687	7,473	6,742	-	1,800	34,702
Total	858,024	260,938	612,678	-	30,150	1,761,790

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****11. ADMINISTRATION EXPENSES (continued)****11.1 Trustees' remuneration and consideration expenses - 2021**

Name	Fees for meeting attendance R	Fees for holding office R	Travel and accommodation R	Conference fees R	Telephone allowance R	Total R
Mr C Beard	85,708	20,835	22,255	-	-	128,798
Ms S Booysen	88,901	20,835	55,606	-	3,150	168,492
Mr T Campher	116,349	27,556	6,857	-	1,350	152,112
Mr HF Fourie	51,258	27,556	121	-	-	78,935
Mr WH Goosen	43,975	13,778	20,379	-	2,250	80,382
Mr B Jonker	163,611	27,557	93,007	-	4,500	288,675
Mr F Mabaso	68,567	20,835	63,980	-	-	153,382
Mr F Mackenzie	155,126	41,156	24,025	-	1,350	221,657
Mr MJ Mamabolo	65,206	27,556	5,745	-	-	98,507
Mr M Nondywana	8,963	6,721	-	-	-	15,684
Mr L Siwani	22,688	7,058	19,690	-	900	50,336
Ms V Xam	-	-	5,745	-	-	5,745
Total	870,352	241,443	317,410	-	13,500	1,442,705

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

For the year ended 31 December 2022

12. NET IMPAIRMENT LOSSES ON HEALTHCARE RECEIVABLES

	2022	2021
	R	R
Trade and other receivables		
Debt not collectable:		
Movement in allowance for expected credit losses	44,780	8,087
Written off during the year	212,197	226,386
Previously written off receivables recovered	(5,260)	(18,317)
	<u>251,717</u>	<u>216,156</u>

Trade and other receivables are considered to be impaired when four months have elapsed and the outstanding amount has not been collected.

13. INVESTMENT INCOME	2022	2021
	R	R
Realised (loss)/gain on disposal of financial assets at fair value through Profit or Loss	4,340	(16,396)
Interest on cash and cash equivalents	307,826	159,569
Interest on financial assets at fair value through other Profit or Loss	7,231,574	7,263,042
	<u>7,543,740</u>	<u>7,406,215</u>

14. SUNDRY INCOME

Old and unidentified credit balances written back to income	242,280	231,126
	<u>242,280</u>	<u>231,126</u>

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****15. RELATED PARTY TRANSACTIONS****Employer**

Transnet SOC Ltd is providing additional funding for the SATS risk pool (Guardian option) in order to cover the shortfall between member contributions and claims, and to keep the risk pool at the statutory required reserve ratio level of 25%.

Administrators and their associates

The administrators and their associates do not fall within the definition of a related party. The information below has been included due to the significance of the outsourcing relationships.

The administrator Momentum Health Solutions (Pty) Ltd has significant influence over the Fund, as Momentum Health Solutions provides financial and operational information as well as managed care services, but does not control the Fund. Momentum Health Solutions provides administration and managed care services.

Universal Health (Pty) Ltd provides administration and managed care functions on the Link Option but does not control the Fund.

Actuarial and Consultancy services company NMG Consultants and Actuaries (Pty) Ltd has significant influence over the Fund, as it provides actuarial and consultancy services but does not control the Fund.

Transactions with administrators and their associates are governed by contracts and service level agreements.

Key management personnel

The key management personnel are those persons who have the authority and responsibility for planning, directing and controlling the activities of the Fund. Key management personnel include the Board of Trustees, Principal Officer, sub-committee members, their dependants and close family members.

Transaction with related parties

The following table provides the total amount of transactions which have been entered into with related parties for the relevant year.

Key management personnel (Board of Trustees, Principal Officer and sub-committee members)

	2022	2021
	R	R
Statement of comprehensive income		
Contributions received	350,095	300,984
Claims incurred	(336,782)	(634,743)
Principal Officer's fees and expenses	(5,037,661)	(4,820,152)
Board of Trustee's fees and expenses	(1,761,790)	(1,442,705)
Audit committee fees	(188,669)	(277,927)

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For the year ended 31 December 2022

15. RELATED PARTY TRANSACTIONS (continued)

Details regarding trustee remuneration is disclosed in note 11.1.

There were no ex-gratia payments made to key management during the 2022 and 2021 financial years.

The terms and conditions of the related party transactions were as follows:

Transaction	Nature of transactions and conditions thereof.
Contributions received	This constitutes the contributions paid by the party as a member of the Fund, in their individual capacity. All contributions were at the same terms as applicable to third parties.
Claims incurred	This constitutes the amounts claimed by related parties, in their individual capacity as members of the Fund.

Transaction with entities that have significant influence

	2022	2021
	R	R
Statement of comprehensive income		
Transnet SOC Ltd - funding for SATS pensioners	123,035,640	125,248,731
Momentum Health Solutions - Administration fee	34,849,599	38,168,322
Momentum Health Solutions - Managed care services	15,913,223	17,513,740
NMG Consultants and Actuaries - Actuarial services	2,794,157	2,673,860
Universal Health - Managed care services	1,463,240	1,563,250

Statement of financial position

Momentum Health Solutions - reimbursement due	165,167	326,629
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Terms and conditions of the administration agreement (Momentum Health Solutions)

The administration agreement is in terms of the rules of the Fund and in accordance with instruction given by the Board of Trustees of the Fund. The Board of Trustees reviews the performance of the service provider and renew the contract on an annual basis. The Fund has the right to terminate the agreement on 180 days notice.

Terms and conditions of the managed care agreement (Momentum Health Solutions)

The managed care agreement is in accordance with instruction given by the Trustees of the Fund. The Board of Trustees reviews the performance of the service provider and renew the contract on an annual basis. The Fund has the right to terminate the agreement on 90 days notice.

Terms and conditions of the administration and managed care agreement (Universal Health)

The Universal Health agreement is in accordance with the instruction given by the Board of Trustees of the Fund. The Board of Trustees reviews the performance of the service provider and renew the contract on an annual basis. The Fund has the right to terminate the agreement on 180 days' notice.

Terms and conditions of actuarial and consultancy contracts

The actuarial and consultancy contract is in accordance with the instruction given by the Board of Trustees of the Fund. The Board of Trustees reviews the performance of the service provider and renew the contract on an annual basis. The Fund has the right to terminate the agreement on 90 days notice.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

For the year ended 31 December 2022

16. NET HEALTHCARE RESULT PER BENEFIT OPTION

2022	Link R	Select R	Prime R	Guardian R	Total R
Contribution income	35,632,940	322,471,006	34,991,988	147,664,660	540,760,594
Relevant healthcare expenditure	(27,682,479)	(300,190,250)	(32,265,249)	(151,056,014)	(511,193,992)
Risk claims incurred	(25,786,832)	(292,408,272)	(31,453,238)	(144,404,397)	(494,052,739)
Managed care services	(1,918,361)	(7,920,192)	(816,694)	(6,721,216)	(17,376,463)
Third party risk claims recoveries	22,714	138,214	4,683	69,599	235,210
Gross healthcare result	7,950,461	22,280,756	2,726,739	(3,391,354)	29,566,602
Administration expenditure	(3,268,015)	(17,790,733)	(1,942,233)	(29,166,866)	(52,167,847)
Net impairment losses on healthcare receivables	(15,757)	(85,861)	(9,465)	(140,634)	(251,717)
Net healthcare result	4,666,689	4,404,162	775,041	(32,698,854)	(22,852,962)
Other income	220,827	1,924,501	197,330	5,443,362	7,786,020
Other expenditure	(3,959)	(35,911)	(3,950)	(108,411)	(152,231)
Surplus/(deficit) for the year	4,883,557	6,292,752	968,421	(27,363,903)	(15,219,173)
Number of members at the end of the year	1,530	9,050	294	4,470	15,344

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

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16. NET HEALTHCARE RESULT PER BENEFIT OPTION

2021	Link R	Select R	Prime R	Guardian R	Total R
Contribution income	37,238,729	338,070,989	42,145,718	152,098,013	569,553,449
Relevant healthcare expenditure	(30,049,581)	(322,613,920)	(41,098,222)	(173,624,188)	(567,385,911)
Risk claims incurred	(28,231,084)	(315,162,477)	(40,058,837)	(166,889,534)	(550,341,932)
Managed care services	(2,004,992)	(8,638,061)	(1,089,296)	(7,344,641)	(19,076,990)
Third party risk claims recoveries	186,495	1,186,618	49,911	609,987	2,033,011
Gross healthcare result	7,189,148	15,457,069	1,047,496	(21,526,175)	2,167,538
Administration expenditure	(3,389,044)	(18,972,270)	(2,294,917)	(31,066,919)	(55,723,150)
Net impairment losses on healthcare receivables	(13,142)	(73,601)	(8,884)	(120,529)	(216,156)
Net healthcare result	3,786,962	(3,588,802)	(1,256,305)	(52,713,623)	(53,771,768)
Other income	152,899	1,331,958	154,658	5,964,940	7,604,455
Other expenditure	(3,051)	(27,705)	(3,460)	(136,543)	(170,759)
Surplus/(deficit) for the year	3,936,810	(2,284,549)	(1,105,107)	(46,885,226)	(46,338,072)
Number of members at the end of the year	1,573	10,119	396	5,126	17,214

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ANNUAL FINANCIAL STATEMENTS

NOTES TO THE FINANCIAL STATEMENTS

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17. INSURANCE RISK MANAGEMENT

NATURE AND EXTENT OF RISKS ARISING FROM INSURANCE CONTRACTS

The Fund issues contracts that transfer insurance risk. This section summarises these risks and the manner in which the Fund manages them.

Insurance risk - description of benefit options

The types of benefits offered by the Fund in return for monthly contributions are indicated below:

Description of health benefits provided

Link

Hospitalisation: This option provides hospital benefits for PMB conditions at State facilities. Admissions in Private facilities are covered through Universal Healthcare network for emergency treatment in cases of an accident or trauma and for selected procedures.

Chronic benefits: Benefits are provided through Universal network pharmacies.

Day-to-day cover: Benefits are provided through Universal Healthcare networks and contracted providers.

Select

Hospitalisation: This option provides hospital benefits for PMB and non-PMB conditions at State facilities. Admissions in Private facilities are covered through the Transmed private hospital network for emergency treatment (medical, accidents and trauma), psychiatric treatment, cancer surgery and for selected procedures.

Chronic benefits: Benefits are provided through Transmed pharmacy network.

Day-to-day cover: Benefits are provided through the member's own choice of healthcare or service provider, subject to the day-to-day limit.

Optical and dental services which are managed by the contracted providers.

Prime

Hospitalisation: This option provides private hospital benefits for PMB conditions through Transmed private hospital network.

Chronic benefits: Benefits are provided through Transmed pharmacy network.

Day-to-day cover: No day-to-day cover is provided other than out-patient care for chronic conditions.

Guardian

Hospitalisation: This option provides hospital benefits for PMB and non-PMB conditions at State facilities and for selected procedures at private facilities.

Chronic benefits: Benefits are provided through Transmed pharmacy network.

Day-to-day cover: Benefits are provided through the member's own choice of healthcare or service provider, subject to the day-to-day limit.

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17. INSURANCE RISK MANAGEMENT (continued)

Risk management objectives and policies for mitigating insurance risk

The primary insurance activity carried out by the Fund assumes the risk of loss from members and their dependants that are directly subject to the risk. These risks relate to the health of the Fund members. As such the Fund is exposed to the uncertainty surrounding the timing and severity of risk claims under the risk contract. The Fund also has exposure to market risk through its investment activities.

The Board of Trustees has developed and approved a documented policy for the acceptance and management of insurance risk to which the Fund is exposed. Reference has also been made to the requirements of the Medical Schemes Act in compiling the insurance risk management policy. This policy is reviewed annually and the benefit options provided to members are structured to fall within the acceptable insurance risk level specified. The Board of Trustees also determines the policy for entering into alternative risk transfer arrangements and/or commercial re-insurance contracts. The annual business plan is structured around the insurance risk management policy.

The Fund manages its insurance risk through:

- benefit limits and sub-limits on different categories of risk claims;
- approval procedures for transactions that involve pricing guidelines;
- pre-authorisation for procedures and hospitalisation in order to monitor and manage cost;
- case management to ensure effective and cost effective treatment;
- disease risk management, which focus on high cost individuals;
- medicine risk management programme;
- HIV and AIDS programme; and
- Home-based care services

The Fund uses several methods to assess and monitor insurance risk exposures both for individual types of risks insured and overall risks. These methods include internal risk measurement models, sensitivity analyses, scenario analyses and stress testing. The theory of probability is applied to the pricing. The principal risk is that the frequency and severity of risk claims is greater than expected. Insurance events are by their nature, random, and actual number and size of events during any one year may vary from those estimated with established statistical techniques.

Experience shows that the larger the portfolio of similar insurance contracts, the smaller the relative variability about the expected outcome will be. In addition, a more diversified portfolio is less likely to be affected across the board by a change in any subset of the portfolio. The Fund has developed its insurance underwriting strategy to diversify the type of insurance risk accepted and within each of these categories to achieve a sufficient large population of risks to reduce the variability of the expected outcome.

Frequency and severity of risk claims

For insurance contracts issued, climatic and seasonal changes, as well as the spread of pandemics give rise to more frequent and severe risk claims.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****17. INSURANCE RISK MANAGEMENT (continued)****Source of uncertainty in the estimation of future risk claims payments**

The Fund re-rates its benefits annually, to ensure that the necessary underwriting surplus is maintained relative to the risk exposure. It is relatively easy to assess the future risk claim payments since the large majority is lodged soon after year-end before the four month expiration of claims period comes into effect.

The Fund's strategy seeks diversity to ensure a balanced portfolio and is based on a large portfolio of similar risks over a number of years and, as such, it is believed that this reduces the variability of the outcome.

The strategy is set out in the annual business plan, which specifies the benefits to be provided by each option, the preferred target market and demographic split thereof.

All the contracts are annual in nature and the Fund has the right to change the terms and conditions of the contract at renewal. Monthly management reports are reviewed which has certain management information including risk contribution income and loss ratios by option.

Concentration of insurance risk

The following table summarises the concentration of insurance risk, with reference to the number of beneficiaries per option, by age group.

2022

Age grouping (in years)	Link	Select	Prime	Guardian	Total
< 26	656	3,078	2	28	3,764
26 - 35	71	516	1	1	589
36 - 50	597	3,229	10	31	3,867
51 - 64	523	2,473	80	229	3,305
> 65	872	5,299	262	4,835	11,268
Total	2,719	14,595	355	5,124	22,793

2021

Age grouping (in years)	Link	Select	Prime	Guardian	Total
< 26	705	3,608	8	33	4,354
26 - 35	91	782	1	1	875
36 - 50	593	3,557	15	37	4,202
51 - 64	600	2,906	111	300	3,917
> 65	884	5,791	345	5,537	12,557
Total	2,873	16,644	480	5,908	25,905

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****17. INSURANCE RISK MANAGEMENT (continued)**

The following table summarises the concentration of insurance risk, with reference to the carrying amount of the insurance claims incurred by age group and in relation to the type of risk covered/benefits provided.

2022

Age grouping (in years)	Medical specialists	General practitioner including Optical and Dental	Supplementary Health Services	Medicines	Private Hospital	Provincial Hospital	Total
	R	R	R	R	R	R	R
<26	3,762,522	1,283,938	997,098	3,160,137	2,096,192	109,637	11,409,525
26 - 35	2,163,253	655,288	1,237,308	2,691,184	770,813	25,409	7,543,255
36 - 50	11,656,391	3,556,560	2,164,777	11,609,495	10,627,669	1,888,419	41,503,311
51 - 65	18,300,393	5,313,442	4,592,356	20,335,785	18,945,894	3,905,374	71,393,244
>65	75,135,787	16,537,592	28,412,657	84,870,583	75,397,902	21,702,448	302,056,968
Link Optical & Dental IBNR adjustment		17,828,280					23,697,600 17,828,280 18,620,556
Total	111,018,347	45,175,099	37,404,196	122,667,184	107,838,470	27,631,287	494,052,739

2021

Age grouping (in years)	Medical specialists	General practitioner including Optical and Dental	Supplementary Health Services	Medicines	Private Hospital	Provincial Hospital	Total
	R	R	R	R	R	R	R
<26	2,541,539	469,895	859,053	2,990,373	3,517,072	173,612	10,551,544
26 - 35	2,199,729	464,109	319,645	2,191,917	1,433,134	1,548,864	8,157,398
36 - 50	13,350,946	2,874,668	4,028,711	10,292,300	10,239,330	3,005,865	43,791,821
51 - 65	17,904,137	5,950,491	4,892,171	14,188,762	17,159,342	4,231,964	64,326,866
>65	83,007,820	20,350,878	34,123,245	112,493,294	88,249,456	21,025,368	359,250,060
Link Optical & Dental IBNR adjustment		20,546,071					26,746,223 20,546,071 16,971,948
Total	119,004,170	50,656,112	44,222,825	142,156,646	120,598,334	29,985,674	550,341,932

The sensitivity analysis for insurance risk illustrates the effect of an ageing membership profile on the insured benefit payment.

An average increase of one year in the age profile of the Fund will increase insured benefits costs with 1.30% (2021:0.51%).

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

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17. INSURANCE RISK MANAGEMENT (continued)**Risk claims development**

Disclosure pertaining to risk claims development is not required as the uncertainty regarding the amounts and timing of risk claim payments is typically resolved within one year. At year-end the provision is made for those risk claims outstanding that are not yet reported at that date. Details regarding the provision is disclosed in note 6.

18. CAPITAL MANAGEMENT

Capital adequacy risk is the risk that there may be insufficient reserves to provide for adverse variations on actual and future experience.

The Fund monitors capital using a solvency ratio, which is accumulated funds divided by annual contributions.

The Medical Schemes Act requires the Fund to maintain a solvency ratio of 25% of contributions. The Fund's solvency ratio is 17.96% (2021: 19.72%) (Refer note 25 on page 50).

The Trustees have implemented the actions stipulated in the business plan in order to increase the reserve ratio of the Working Members and Pensioner (WMP) risk pool in order to reach the required 25% level.

The SATS risk pool's reserve ratio was 35.66% at the end of the year. The funding from Transnet SOC Ltd for the 2023 year will be enough to maintain reserves of 25%.

This measure of capital is consistent with prior years. The Fund's objective is to return to a solvency level of 25%.

19. CRITICAL ACCOUNTING JUDGEMENTS AND AREAS OF KEY SOURCES OF ESTIMATION UNCERTAINTY

In the process of applying the Fund's accounting policies, management has made the following judgements that have the most significant effect on the amounts recognised in the financial statements.

A key assumption concerning the future that has a significant risk of causing a material adjustment to the carrying amounts of liabilities in the next financial year is that used to determine the provision for outstanding risk claims (refer note 6).

When arriving at this provision, it is assumed that the reporting and settlement trend of risk claims incurred but not reported will be similar to that of the previous and current financial period. The provision is calculated based on percentages derived from the previous and current financial period and is adjusted as the claims are reported and settled.

Although the assumption is considered critical, post reporting date settlements are monitored to ensure reasonability of the original provision.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****20. FINANCIAL RISK MANAGEMENT**

The Management Committee makes risk management and investment decisions, under the guidance and policies approved by the Board of Trustees. The Management Committee identifies and evaluates financial risks associated with the Fund's investment portfolio.

The Management Committee provides written principles for overall risk management, as well as written policies covering specific areas, market risk, credit risk, and investing excess liquidity. The Board of Trustees approves all of these written policies.

The Fund appointed a professional asset management company to manage the Fund's investment portfolio. The approach of the asset manager is to construct a portfolio of diversified asset classes in order to obtain an optimal risk/return mix. The strategy is to focus on strategic asset allocation rather than on timing the market. This will mitigate the risk in volatile markets.

The following summary represents the major asset classifications held by the Fund which are exposed to the financial risks as discussed:

Asset allocation summary	2022 R	2021 R
Financial assets at fair value through Profit or Loss	114,807,226	143,240,976
Cash and cash equivalents (note 5)	2,812,808	3,671,505
Trade and other receivables (note 4)	15,538,501	7,180,051
	<u>133,158,535</u>	<u>154,092,532</u>

The Fund's activities expose it to market risk. Market risk is defined as the risk that the fair value of future cash flow of financial instruments will fluctuate because of changes in market prices. Market price risk comprises three types of risk: currency risk, interest rate risk and other price risk. These risks arise from open positions in interest rates which are exposed to general and specific market movements. The Fund's overall risk management programme focuses on the unpredictability of financial markets and seeks to minimise potentially adverse effects on the financial performance of the investments that the Fund holds to meet its obligations to its members.

The following summary represents the major liabilities in the Fund.	2022 R	2021 R
Outstanding risk claims provision (note 6)	20,957,546	22,437,439
Trade and other payables (note 7)	15,087,578	19,357,684
	<u>36,045,124</u>	<u>41,795,123</u>

The Fund does not pay any interest on these liabilities.

Financial Risk Factors***Currency risk***

The Fund operates in South Africa and therefore its cash flows are denominated in South African Rand (ZAR). The Fund therefore is not exposed to currency risk.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS**

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20. FINANCIAL RISK MANAGEMENT (continued)***Interest rate risk***

The Fund is exposed to interest rate risk through its investments in interest bearing investments.

The table below summarises the Fund's exposure to interest rate risk. Included in the table are the Fund's investments at carrying amounts, categorised by the maturity dates.

2022	Up to 1 Month R	1 – 3 months R	More than 3 months R	More than 1 year	Total R
Cash and cash equivalents	2,812,808	-	-	-	2,812,808
Financial assets at fair value through Profit or Loss	21,017,187	6,121,524	23,917,968	63,750,547	114,807,226
	<u>23,829,995</u>	<u>6,121,524</u>	<u>23,917,968</u>	<u>63,750,547</u>	<u>117,620,034</u>
2021	Up to 1 Month R	1 – 3 months R	More than 3 months R	More than 1 year	Total R
Cash and cash equivalents	3,671,505	-	-	-	3,671,505
Financial assets at fair value through Profit or Loss	40,807,797	3,820,361	35,405,660	63,207,158	143,240,976
	<u>44,479,302</u>	<u>3,820,361</u>	<u>35,405,660</u>	<u>63,207,158</u>	<u>146,912,481</u>

Sensitivity analysis – interest rate risk

The sensitivity analysis for interest rate risk illustrates how changes in the fair value of future cash flows of a financial instrument will fluctuate because of changes in market interest rates at the reporting date.

A decrease/increase of 100 basis points in interest yields would result in an increase/decrease in members' funds of R 1 176 200 (2021: R 1 469 125).

This sensitivity analysis is based on a change in an assumption while holding all other assumptions constant. In practice, this is unlikely to occur, and changes in some of the assumptions may be correlated. Management monitors the reported interest rate movements on a monthly basis.

Other price risk

The Fund was not exposed to equity risk during the year.

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ANNUAL FINANCIAL STATEMENTS**NOTES TO THE FINANCIAL STATEMENTS****For the year ended 31 December 2022****20. FINANCIAL RISK MANAGEMENT (continued)*****Credit risk***

Credit risk is the risk of financial loss to the Fund if a counterparty to a financial instrument fails to meet its contractual obligations. The Fund's principal financial assets are cash and cash equivalents, available-for-sale investments and trade and other receivables. The Fund's credit risk is primarily attributable to its trade and other receivables.

The amounts presented in the statement of financial position are net of allowances for impairment. An allowance for impairment is made where there is an identified loss event, which based on previous experience is evidence of a reduction in the recoverability of the cash flows. The Fund has a policy of limiting the amount of credit exposure to any one financial institution.

Trade and other receivables

The Fund's exposure to credit risk is influenced by the characteristics of each member and the demographics of the membership base. Geographically there is no concentration of credit risk.

For the purpose of a collective evaluation of impairment, financial assets are grouped on the basis of similar credit risk characteristics that are indicative of the debtor's ability to pay all amounts due according to the contractual terms (for example on the basis of a credit risk evaluation or grading process that considers asset type, industry, geographical location, collateral type, past-due status and other relevant factors). Contribution debtors are collected in arrears within 30 days of raising. In monitoring member credit risk, members are grouped according to their credit characteristics, including whether they are an individual, group or government member, whether the risk arises from contributions or member shortfalls. The Board has approved a credit control policy, thereby managing the credit risk to the Fund.

The table below illustrates the quality of the Fund's receivables in order to assess the risk:

As at 31 December 2022

	Fully performing	Past due	Impaired	Total
	R	R	R	R
Contributions outstanding	15,003,340	22,700	-	15,026,040
Member and provider debt	197,833	28,690	82,545	309,068
Other receivables	285,938	-	-	285,938
	15,487,111	51,390	82,545	15,621,046

As at 31 December 2021

	Fully performing	Past due	Impaired	Total
	R	R	R	R
Contributions outstanding	6,365,983	96,876	-	6,462,859
Member and provider debt	82,168	329,387	37,765	449,320
Other receivables	305,637	-	-	305,637
	6,753,788	426,263	37,765	7,217,816

The table above illustrates the Fund's maximum exposure to credit risk.

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The table below provides an age analysis of the credit that is past due, but not yet impaired.

As at 31 December 2022

	30 - 60 days	60 - 90 days	90 - 120 days	Total
	R	R	R	R
Contributions outstanding	22,700	-	-	22,700
Member and provider debt	15,795	7,536	5,359	28,690
	<u>38,495</u>	<u>7,536</u>	<u>5,359</u>	<u>51,390</u>

As at 31 December 2021

	30 - 60 days	60 - 90 days	90 - 120 days	Total
	R	R	R	R
Contributions outstanding	96,876	-	-	96,876
Member and provider debt	19,825	1,317	308,245	329,387
	<u>116,701</u>	<u>1,317</u>	<u>308,245</u>	<u>426,263</u>

Contribution debtors

On analysing the credit quality of contribution debtors, the Fund collected 99% of these amounts in January 2023. This indicates a high credit quality relating to debtors. Consequently no additional disclosure of credit quality is provided.

Active member claim debtors

These debtors are members of the Fund and therefore are expected to have similar credit quality to the contribution debtors. This does not imply that all amounts were collected in January 2023.

Cash and cash equivalents

The credit risk on liquid funds is limited because the counter parties are financial institutions with high credit ratings. The Fund has no significant concentration of credit risk, with exposure spread over a large number of counter parties and members.

Moody's deposit ratings	Deposit rating		2022	2021
Financial institution	2022	2021	R	R
ABSA	Ba2	Ba2	202,956	800,032
Citibank	Aa3	Aa3	2,063	10,088
Standard Bank	Ba2	Ba2	2,086,615	2,290,332
Nedbank	Ba2	Ba2	521,174	571,053

Financial assets at fair value through Profit or Loss

The Fund limits its exposure to credit risk by investing in liquid securities and only with counterparties that have a high credit rating. The Trustees do not expect any counterparty to fail to meet its obligations. Annexure B to Regulation 30 to the Medical Schemes Act, of South Africa, as amended, prescribes the credit limits per institution which reduces the individual risk per institution. The utilisation of these limits are regularly monitored.

Fair value estimation

The carrying value of financial assets (less allowance for expected credit losses) and financial liabilities with a maturity date of less than one year, are assumed to approximate their fair values. The fair value of financial liabilities for disclosure purposes is estimated by discounting the future contractual cash flows at the current market interest rate that is available to the Fund for similar financial instruments.

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20. FINANCIAL RISK MANAGEMENT (continued)

Fair value of financial instruments

The Fund measures fair values using the following fair value hierarchy that reflects the significance of the inputs used in making the measurements.

The hierarchy levels are defined as follows:

Level 1: Quoted prices (unadjusted) in active markets for identical assets or liabilities. These are readily available in the market and are normally obtainable from multiple sources.

Level 2: Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly (i.e. as prices) or indirectly (i.e. derived from prices).

Level 3: Inputs for the asset or liability that are not based on observable market data (unobservable inputs).

The Fund's financial instruments totalling R 114 807 226 (2021: R 143 240 976), measured at fair value at reporting date are all categorised as level 1 instruments.

Liquidity risk

Liquidity risk is the risk that the Fund will encounter difficulty in meeting the obligations associated with its financial liabilities that are settled by delivering cash or another financial asset. The Fund applies prudent liquidity risk management by maintaining sufficient cash and marketable securities so that the availability of funding through liquid holding cash positions with various financial institutions to ensure that the Fund has the ability to fund its day-to-day operations.

Management monitors rolling forecasts of the Fund's liquidity reserve which comprises of cash and cash equivalents (note 5) on the basis of expected cash flow. In addition, the Fund's liquidity management policy involves projecting cash flows for seasonal variances and considers the level of liquid assets necessary to meet these and monitoring statement of financial position liquidity ratios against external regulatory requirements.

At year-end 100% (2021: 100%) of the Fund's assets was invested in money market instruments to ensure that the Fund can meet its short-term liabilities.

The table below analyses the assets and liabilities of the Fund into relevant maturity groupings based on the remaining period at reporting date to the contractual maturity date:

2022	Up to 1 Month R	1 – 3 months R	More than 3 months R	More than 1 year	Total R
Non-current assets					
Financial assets at fair value through Profit or Loss	-	-	-	63,750,547	63,750,547
Current assets					
Financial assets at fair value through Profit	21,017,187	6,121,524	23,917,968	-	51,056,679
Trade and other receivables	15,487,111	51,390	-	-	15,538,501
Cash and cash equivalents	2,812,808	-	-	-	2,812,808
Total assets	39,317,106	6,172,914	23,917,968	63,750,547	133,158,535
Current liabilities					
Trade and other payables	15,087,578	-	-	-	15,087,578
Outstanding risk claim provision	9,229,320	5,852,155	5,876,071	-	20,957,546
Total liabilities	24,316,898	5,852,155	5,876,071	-	36,045,124

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20. FINANCIAL RISK MANAGEMENT (continued)

2021	Up to 1 Month R	1 – 3 months R	More than 3 months R	More than 1 year	Total R
Non-current assets					
Financial assets at fair value through Profit or Loss	-	-	-	63,207,158	63,207,158
Current assets					
Financial assets at fair value through Profit or Loss	40,807,797	3,820,361	35,405,660	-	80,033,818
Trade and other receivables	6,753,788	426,263	-	-	7,180,051
Cash and cash equivalents	3,671,505	-	-	-	3,671,505
Total assets	51,233,090	4,246,624	35,405,660	63,207,158	154,092,532
Current liabilities					
Trade and other payables	19,357,684	-	-	-	19,357,684
Outstanding risk claim provision	9,020,688	8,141,071	5,275,680	-	22,437,439
Total liabilities	28,378,372	8,141,071	5,275,680	-	41,795,123

21. LEGAL RISK

Legal risk is the risk that the Fund will be exposed to in respect of contractual obligations which have not been provided for. At 31 December 2022 the Fund did not consider there to be any significant concentration of legal risk that had not been provided for.

22. CONTINGENT ASSET**Road Accident Fund (RAF)**

The Fund grants assistance to its members in defraying expenditure incurred in connection with a claim that is also made to the RAF, administered in terms of the Road Accident Fund Act No. 56 of 1996. If a member is re-imbursed by the RAF, they are legally obliged to cede that payment to the Fund to the extent that they have already been compensated.

Due to the uncertainty over the recoverability of the risk claims lodged by the members with the RAF a contingent asset has arisen to the value of R 7 904 180 (2021: R 8 590 378). The net recoveries from RAF for the year was R 235 210 (2021: R 1 230 803).

23. PROFESSIONAL INDEMNITY AND FIDELITY GUARANTEE INSURANCE

The Fund was covered under a professional indemnity and fidelity guarantee insurance policy throughout the reporting year. The cover amounted to R 80 000 000 as at 31 December 2022 (2021: R 80 000 000).

24. EVENTS AFTER REPORTING DATE

There have been no events that have occurred between the end of the accounting period and the date of the approval of these annual financial statements that the Trustees consider should be brought to the attention of the members of the Fund.

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25. GOING CONCERN

The Board of Trustees considers the Fund to be a going concern. The Board took the following into consideration in the evaluation of the Fund's going concern status:

- Available cash and investments at the end of the year amounted to R 117 620 033.
- Transnet SOC Ltd will be providing funding to ensure that the SATS risk pool maintains a reserve level of 25%.
- A business plan has been developed by the Trustees, with the assistance of the Fund's actuary, in order to get the Fund to a reserve level of 25%.
- It is expected that the Fund's reserve ratio will decrease from 17.96% at 31 December 2022 to 17.61% at 31 December 2023.
- An actuarial model was developed to assist the Trustees to consider the going concern status of the Fund. Even with the most negative assumptions on membership movements and membership risk profiles, the model indicated that the Fund will be a going concern.

26. NON-COMPLIANCE WITH MEDICAL SCHEMES ACT 131 OF 1998**26.1 Outstanding contributions****Nature and impact**

In terms of Section 26(7) of the Act, contributions should be received in accordance with the rules of the Fund. Per the Fund rules, contributions are required to be received at least three days after their due date. Instances were noted where contributions were received late.

Causes for the failure

The reason for this is due to the inherent nature of the business.

Corrective action

On-going communication to employer groups has occurred. The Fund also applied to the Council for Medical Schemes and obtained an exemption for the three day contribution rule.

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26. NON-COMPLIANCE WITH MEDICAL SCHEMES ACT 131 OF 1998 (continued)**26.2 Self-supporting options****Nature and impact**

In terms of Section 33(2) benefit options shall be self-supporting in terms of membership and financial performance. The Guardian Option recorded a deficit for the year ended 31 December 2022.

Causes for the failure

The deficit generated during the year is mainly due to the reduced Transnet SOC subsidy, intended to bring the risk pool closer to the 25% solvency requirement.

Corrective action

The agreement with Transnet to ensure that the SATS pool reserve levels does not fall below 25%, has been renewed. A Business Plan to get the Fund's reserve levels to 25% has been updated.

26.3 Reserve ratio**Nature and impact**

In terms of Regulation 29, a medical scheme should have reserves of at least 25% of its gross annual contributions. At 31 December 2022, the Fund had a reserve ratio of 17.96%, which is lower than the required level.

Causes for the failure

The working member and pensioner risk profile deteriorated during the year. Further to this, Transnet SOC reduced its subsidy for the Guardian Option, intended to bring the risk pool closer to the 25% solvency requirement.

Corrective action

A business plan was developed by the Trustees, with the assistance of the Fund's actuary in order to restore the Fund's reserve levels back to 25%. The Council for Medical Schemes approved the business plan.

26.4 Payment of claims within 30 days**Nature and impact**

In terms of Section 59(2) a member or provider claim should be settled within 30 days of submission. Instances were noted during sample testing where settlements took more than 30 days.

Causes of failure

Delays can occur when accounts are referred for clinical audit or other investigations. These are however the exceptions, and claims are generally paid within the prescribed time.

Corrective action

The administrator is aware of the requirements and comply as far as possible. It is however an inherent part of the industry that a limited number of problematic claims may exceed the payment requirement of 30 days.

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27. STANDARDS, AMENDMENTS TO STANDARDS, IMPROVEMENTS AND INTERPRETATIONS ARE RELEVANT BUT NOT EFFECTIVE FOR THE FUND

IFRS 17 is the new accounting standard under which insurance contracts will be reported for periods beginning on or after 1 January 2023. Therefore, the first year-end date for which the new IFRS 17 accounting standard will apply is 31 December 2023. This also means that the IFRS 17 standard will have to be applied in a similar way for the comparative year-end date within the 2023 financial reporting, which is 31 December 2022.

On an annual basis the Fund reviews the pricing and benefits per option, therefore the Fund has the practical ability to reprice the contracts of the entire Fund on an annual basis. The contract boundary for the Fund is therefore 12 months. As the contract duration of the Fund is 12 months, it makes the Fund eligible to apply the Premium Allocation Approach (PAA) which is a simplified valuation model. The Fund will adopt the premium allocation approach to measure its insurance contracts. Judgement has been applied as to how the Fund determined the unit of account for the measurement of its insurance contracts. Management has assessed their portfolio as the Fund as a whole due to the holistic pricing methodologies and risk management strategy that manages the risk on a Fund level. The Fund will apply the exemption to grouping as allowed by paragraph 20 of IFRS17: law or regulation specifically constrains the Fund's ability to set different prices or levels of benefits for members with different characteristics. The Medical Schemes Act prohibits the Fund to set different prices for its members. As such, the Fund does not group contracts in various profitability groupings. The Fund actuaries have already started analysing the impact on the liability for incurred claims and onerous losses.

Risk adjustment to the Outstanding Risk Claims Provision

The measurement of the IFRS 17 insurance contract liability requires a risk adjustment (RA) for non-financial risk, which is intended to inform users of the annual financial statements regarding the amount charged by the entity for the uncertainty in amount and timing of cash flows.

Onerous contract recognition

The provisions of IFRS 17 require an onerous contract (i.e. one that is expected to be loss-making) to have the expected loss recognised as the Fund becomes aware of it rather than as the contract unwinds (as is currently the case). In the case of the Transmed Medical Fund, a contract has been defined as the whole Fund i.e. an onerous contract will only exist if a loss-making projection/budget is approved at a Fund level. In practice, this means that when the contribution increases are approved in July/August, any loss projected for the next year using the new contribution increases will be considered an onerous contract.