

**Statutory Instrument 330 of 2000.**

**Medical Services (Medical Aid Societies) Regulations, 2000**

*SIs 330/2000, 35/2004*

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**IT is hereby notified that the Minister of Health and Child Welfare has, in terms of section 16 of the Medical Services Act [*Chapter 15:13*], made the following regulations:—**

## PART I

### PRELIMINARY

#### *1. Title*

These regulations may be cited as the Medical Services (Medical Aid Societies) Regulations, 2000.

#### *2. Interpretation*

In these regulations—

“accumulated funds” means the net asset value of a medical aid society, excluding funds set aside for specific purposes and non-distributable reserves;

“appropriate fee” means the appropriate fee prescribed in the Third Schedule in respect of the application for and registration of a society or the renewal of registration of a society;

[Definition inserted by s.i 35 of 2004]

“authorised person” means a person authorised by the Secretary in terms of subsection (1) of section 16C;

[Definition inserted by s.i 35 of 2004]

“board” means the board of trustees or directors charged with overseeing the management of the business of a medical aid society;

“dependant” means—

(a) the spouse, dependent child, or other member of the member’s immediate family in respect of whom the member is liable for family care and support; or

(b) any dependent parent or other person who, under the constitution or rules of a medical aid society, is recognised as a dependant of such a member;

“employee group benefits scheme” means a medical scheme benefiting the employees of any employer or combination of employers;

“existing medical aid society” means a society deemed to have been registered in terms of section 17 of the Act;

“fit and proper person” means a person not disqualified to be appointed or elected as a director, trustee, principal officer or independent administrator of a medical aid society in terms of section 8;

“health-care provider” means any of the following persons who or which supplies to a member or dependant of a member a service qualifying for payment or reimbursement by the medical aid society to which the member belongs—

- (a) a medical or dental practitioner, nurse, pharmacist or other health practitioner; or
- (b) a health institution; registered or required to be registered in terms of the Health Professions

Act [*Chapter 27:19*];

“independent administrator” means a person who carries on the business of administering or managing the business of any medical aid society or medical scheme under any agency agreement or similar arrangement with the board of the society and, in a case where the independent administrator is a company, includes every director of the company;

“joint advisory council” means the joint advisory council established in terms of paragraph (b) of subsection (1) of section 28;

“low-cost scheme” means a scheme referred to in subsection (6) of section 11;

“medical aid broker or consultant” means any person providing advice in respect of the admission of members to a medical aid society and related administrative services under an agreement between the broker or consultant and the society, member or employer;

“medical aid card” means a card issued by a society indicating that the person named therein is a member in good standing of the society;

[Definition inserted by s.i 35 of 2004]

“medical aid societies advisory council” means the medical aid societies advisory council established in terms of paragraph (a) of subsection (1) of section 28;

“medical aid society” or “society” means an open medical aid society or a restricted medical aid society;

“medical scheme” means any scheme administered by a medical aid society for the benefit of a specified class of member;

“member” means a person who has been enrolled or admitted as a member of a medical aid society or who, in terms of the constitution or rules of a society, is a member of such society;

“minimum benefits scheme” means the minimum benefits scheme referred to in subsection (4) of section 11;

“officer” means a member of the board of a medical aid society, principal officer, independent administrator, treasurer and any other employee of the society the nature of whose duties may require him to account directly to the board;

“open, medical aid society” means a medical aid society which is not a restricted medical aid society;

“principal officer” means the person directly responsible to the board of a medical aid society for administering or managing the business of the society;

“restricted medical aid society” means a medical aid society the constitution of which restricts the eligibility for membership by reference to—

- (a) employment or former employment in a profession, trade, industry or calling;
- (b) employment or former employment by a particular employer, or by an employer of a particular class;

and includes a sick fund established or maintained by a municipal or town council in terms of section 147 of the Urban Councils Act [*Chapter 29:15*];

“specialist medical unit or facility” means— (a)

a medical laboratory; or

- (b) a radiology unit; or
- (c) a medical rehabilitation centre; or
- (d) such other specialist medical unit or facility as the Secretary may, from time to time, notify in writing to medical aid societies after consultation with the medical aid societies advisory council;

“unfair practice” means any practice—

- (a) referred to in paragraph (a), (b) or (c) of section 16A by a health-care provider in relation to a member; or
- (b) referred to in paragraph (a) or (b) of section 16B by a society in relation to a health-care provider;”.

[Definition inserted by s.i 35 of 2004]

“waiting period”, in relation to a member, means the period between the admission of the member into the society and the date on which the member is entitled under the constitution or rules of the society to claim any benefits.

## PART II

### REGISTRATION OF MEDICAL AID SOCIETIES

#### **3. Register of medical aid societies**

(1) he Secretary shall establish and maintain a register of medical aid societies registered in terms of section 4 or deemed to be registered in terms of section 17 of the Act, in which the following shall be recorded—

- (a) the name and address of the medical aid society, and whether it is a restricted or open medical aid society; and
- (b) the date of registration of the medical aid society, if it was registered in terms of section 4; and
- (c) any terms or conditions imposed on the medical aid society upon registration in terms of section 4; and
- (d) the particulars of the cancellation of any registration, and of the restoration of any such cancelled registration; and
- (e) any alterations to the particulars referred to in paragraph (a) or (c).

(2) Any person may inspect the register free of charge at all reasonable times at the premises of the Secretary or at such other place as the Secretary may direct.

#### **4. Registration of medical aid societies**

(1) Any person who wishes to establish or conduct a medical aid society shall apply to the Secretary in the form prescribed in the First Schedule for the registration of The society.

(2) The application for registration as a medical aid society shall be accompanied by the appropriate fees, two copies of the constitution of the society, a business plan of the society containing the particulars required by section 6 and, if applicable, the rules of the medical aid society and a copy of an agreement or instrument referred to in paragraph (c) of subsection (5) of section 7.

(3) If the Secretary is satisfied that—

- (a) every person proposed as a member of the board of the medical aid society, and as the principal officer or independent administrator of the society, is a fit and proper person to hold the office concerned; and
- (b) the constitution of the proposed medical aid society complies with section 10; and
- (c) the proposed medical aid society complies with or will be able to comply with these regulations; and (d) the name under which the medical aid society proposes to operate is not a name—
  - (i) which has already been registered; or
  - (ii) which so closely resembles the name of a medical aid society already registered that it is likely to be mistaken for it; or
  - (iii) which is likely to mislead the public; and

(e) the proposed medical aid society is or will be financially sound; the Secretary shall register the medical aid society and may, in doing so, impose such terms and conditions as he deems necessary.

(4) The Secretary shall, as soon as practicable after registering a medical aid society for the first time, publish a notice in the *Gazette* setting out—

- (a) the name and address of the medical aid society, and whether it is a restricted or open medical aid society; and
- (b) the date of registration of the medical aid society; and
- (c) any terms or conditions imposed on the medical aid society upon its registration.

[Subsection amended by s.i 35 of 2004]

(5) The fee for registration shall be refunded to an unsuccessful applicant for registration as a society, but not the application fee. [Subsection inserted by s.i 35 of 2004]

(6) Every society shall be registered for a period of twelve months ending on the 31st March in the year following that in which it was registered, or, in the case of societies that are first registered after the 31st March, for any part of the period of twelve months ending on the 31st March from the date of the first registration.

[Subsection inserted by s.i 35 of 2004]

#### **5. Restriction on use of names denoting medical aid societies**

(1) No person shall, without the consent of the Secretary, conduct any business under a name which includes the words “medical• aid society”, “medical scheme” or any other name which is calculated to indicate or is likely to lead persons to believe that he conducts a medical aid society, unless such business is registered in terms of section 4.

(2) A person who contravenes subsection (1) shall be guilty of an offence and liable to a fine not exceeding level five or imprisonment for a period not exceeding one year or both.

## **6. Business plan of applicant medical aid society**

The business plan of an applicant medical aid society referred to in subsection (2) of section 4 shall include, or be accompanied by, the following projections based on normal assumptions and the most and least favourable assumptions—

- (a) a projected annual balance sheet for the first two years of operation;
- (b) a projected annual income and expenditure account for the first two years of operation; (c) a projected cash flow statement for the first two years of operation.

### **6A. Application for renewal of registration**

Not later than the 31st March, 2004, and thereafter not later than the end of a period of twelve months ending on the 31st March in each year (or, in the case of societies that are first registered after the 31st March, 2004, not later than the end of any part of the period of twelve months ending on the 31st March from the date of the first registration), a registered society wishing to renew the registration shall make application in the form prescribed in the Fourth Schedule accompanied by the appropriate fee:

Provided that if there are any material changes to the particulars furnished in connection with the original or previous application for registration, the applicant concerned shall make a new application in terms of section 4.”

[Section inserted by s.i 35 of 2004]

## **PART III**

### **CONDUCT OF MEDICAL AID SOCIETIES**

## **7. Officers of medical aid societies**

(1) The board of every medical aid society shall employ or appoint a principal officer or independent administrator of the society:

Provided that—

- (i) where a society employs or appoints both a principal officer and an independent administrator it shall notify the Secretary accordingly and specify which of them is primarily responsible for administering or managing the business of the society;
- (ii) in the case of a society established or maintained by a municipal or town council in terms of section 147 of the Urban Councils Act [*Chapter 29:151*, the council concerned, or any officer or member of the council, may be designated as the principal officer for the purposes of these regulations.

(2) If the post of the principal officer or independent administrator is vacant for more than thirty days the medical aid society concerned shall immediately notify the Secretary in writing of that fact.

(3) A principal officer or independent administrator of a medical aid society or medical scheme shall, if appointed or elected as a member of the board of the society, not be present at any meeting of the board while the terms and conditions of his employment or appointment are being decided.

(4) No member of the board of a society shall participate in the discussion of any matter on the agenda of a meeting of the board in which the board member is interested, unless he has disclosed such interest to the board and the board has agreed that he may participate in the discussion of, and voting on, that matter.

(5) Whenever a medical aid society appoints or employs a new principal officer it shall transmit to the Secretary, within thirty days of the appointment—

- (a) the reasons, in writing, for the cessation of the employment of the previous principal officer or independent administrator; and
- (b) the particulars of the new principal officer or independent administrator required by Part II of the form prescribed in the First Schedule, as completed by the new principal officer or independent administrator; and
- (c) in the case of the appointment of an independent administrator, a copy of the agreement or instrument appointing the administrator.

(6) An independent administrator shall keep and account for medical aid society moneys separately from the assets of any other business carried on by the administrator.

(7) A medical aid society which contravenes subsection (2), (3) or (5) shall be guilty of an offence and liable to a fine not exceeding level five.

(8) A member of the board of a society who contravenes subsection (4) shall be guilty of an offence and liable to a fine not exceeding level five or imprisonment for a period not exceeding one year or both.

(9) An independent administrator who contravenes subsection (6) shall be guilty of an offence and liable to a fine not exceeding level five or imprisonment for a period not exceeding one year or both.

### **8. Disqualification for appointment or election as officer of medical aid society**

(1) No person shall be a fit and proper person to be appointed or elected, or to hold office, as a member of the board of a medical aid society, or as a principal officer or independent administrator of a society, if—

- (a) he is a member of the board of another society which carries on business in Zimbabwe in competition with the first-mentioned society; or
- (b) under the law of any country—
  - (i) he has been adjudged or otherwise declared insolvent or bankrupt and has not been rehabilitated or discharged; or
  - (ii) he has made an assignment to, or arrangement or composition with, his creditors which has not been rescinded or set aside; or
  - (iii) he has been convicted of theft, fraud, forgery, uttering a forged document or perjury or any other offence, by whatever name called, that is similar to any of those offences, and has not received a free pardon; or
  - (iv) he has been convicted of any offence and sentenced to a term of imprisonment exceeding six months, imposed otherwise than as an alternative to or in default of payment of a fine, and has not received a free pardon.

(2) Subsection (1) shall not be construed as preventing the constitution or rules of a medical aid society from prescribing further disqualifications, not inconsistent with these regulations, upon the appointment, election or tenure of office of any officer,

(3) If any information comes to the notice of the Secretary to the effect that an officer of a medical aid society is not or has ceased to be a fit or proper person to hold the office concerned, the Secretary shall—

- (a) furnish the board of the society and the officer concerned with full details of all the information the Secretary has in his possession in that regard; and
- (b) request the officer concerned in writing to make written representations to the Secretary on the matter within thirty days of the request.

(4) The Secretary may, after considering any representations received in terms of paragraph (b) of subsection (3), order the board in writing to commence proceedings for the removal of the officer concerned within such period as the Secretary shall specify.

(5) A medical aid society which refuses to comply with an order made in terms of subsection (4) shall— (a) be guilty of an offence and liable to a fine not exceeding level five; and (b) be liable to have its registration cancelled.

### **9. Discrimination, and exclusion of membership in certain circumstances, prohibited**

(1) No medical aid scheme shall, with respect to the admission of persons as members of the society or as between its members participating in the same class of scheme, discriminate against any person of a particular description by race, gender, marital status, ethnic or social origin, nationality, religion or creed—

- (a) by subjecting that person to a condition, restriction or disability to which persons of another such description are not made subject; or
- (b) by conferring on persons of another such description a privilege or advantage which is not conferred on persons of the first-mentioned description; and the imposition of that condition, restriction or disability or the conferring of that privilege or advantage is wholly or mainly attributable to the description by race, gender, marital status, ethnic or social origin, nationality, religion or creed of the persons concerned.

(2) Every person employed by or in a profession, trade, industry, calling, employer or class of employer in respect of whom or which a restricted medical aid society is registered shall be eligible for membership of the society concerned.

(3) A medical aid society which contravenes subsection (1) or (2) shall— (a) be guilty of an offence and liable to a fine not exceeding level five; and

(b) be liable to have its registration cancelled if the offence continues, or upon a second conviction for the offence.

(4) The dependants of a member shall be entitled to participate in the same benefit options as the member, subject only to such reasonable variation in the level of contribution by the member in relation to the number of the member's dependants as are prescribed by the constitution or rules of the medical aid society.

### **10. Matters for which constitution of medical aid society shall provide**

(1) Subject to subsection (2), the constitution of a medical aid society shall provide for the following matters—

- (a) a provision to the effect that the society is a body corporate capable in its corporate name of suing and being sued and doing or causing to be done all such things as may be necessary for or incidental to the exercise of

its powers or the performance of its functions in terms of its constitution or rules;

- (b) the appointment or election of the members of the board of the society, of whom representatives of the individual members of the society shall have at least one half of the votes at meetings of the board or, if the society has group membership, on which representatives of each of the following shall have a third of the votes at meetings of the board—
  - (i) the individual members of the society; and
  - (ii) employers who are members by virtue of contracting an employee group benefits scheme with the society; and
  - (iii) any other group or groups;
- (c) the appointment of a principal officer or independent administrator by the board;
- (d) the appointment, removal from office, powers and remuneration of officers of the society;
- (e) the appointment of the auditor of the society and the duration of such appointment; (f) the power to invest funds;
- (g) the amalgamation and transfer of the business of the society;
- (h) the manner in which, and the circumstances under which, the society shall be terminated and dissolved;
- (i) the appointment of a liquidator in the event of the dissolution of the society;
- (j) the settlement of any complaint or dispute;
- (k) the giving of advance notice to members of any change in contributions, membership fees or subscriptions and benefits or any other condition affecting their membership;
- (l) the manner of calling the annual general meeting and special general meetings of members, the quorum necessary for the transaction of business at such meetings and the manner of voting thereat;
- (m) the terms and conditions applicable to the admission of a person as a member;
- (n) the payment of any benefits according to— (i) a scale, tariff or recommended guide; or
  - (ii) specific directives prescribed in the rules of the society;
- (o) the continuation of the benefits of membership in the circumstances referred to in subsections (2) and (3) of section 16.

(2) The constitution of a society established or maintained by a municipal or town council in terms of section 147 of the Urban Councils Act [*Chapter 29:15*] may, notwithstanding anything to the contrary contained in subsection (1), make provision for any or all of the following—

- (a) the appointment by the council of the members of the board of the society:

Provided that at least one third of the membership of the board shall be appointed or elected by the members of the society to represent the members;

- (b) the ratification by the council of the decisions of the board of the society; (c) the approval by the council of any amendment of the constitution of the society.

(3) A medical aid society shall give written notice to the Secretary of every amendment of its constitution, accompanied by a copy of the amendment certified by the principal officer or independent administrator of the society, within thirty days of the adoption of the amendment in accordance with its constitution.

(4) A medical aid society which contravenes subsection (3) shall be guilty of an offence and liable to a fine not exceeding level five.

### ***11. Minimum benefits to be made available to members***

(1) In this section and the Second Schedule—

“Government or State-aided primary health-care clinic” means any premises administered by the State or a local authority, or by a person receiving a grant from the State to cover the whole or part of the costs of administering the premises, at which services are provided by a health-care provider other than a medical or dental practitioner.

(2) Subject to subsection (6), no registered medical aid society shall make available to its members or potential members any scheme which provides fewer or less favourable benefits than those specified in subsection (3).

(3) Subject to subsection (6), every scheme shall cover the costs of—

- (a) non-specialist medical services provided at a Government or State-aided hospital or a Government or State-aided primary health-care clinic; and
- (b) medical services provided by a specialist or consultant employed or retained by the State to whom the member or the dependant has been referred by a medical practitioner employed in, or granted the privilege of access to, a Government or State-aided hospital.

(4) A society may, in addition to any other scheme it may make available to its members or potential members, make available to every member or potential member who so wishes, for the benefit of the member and the dependants of such member, a minimum benefits scheme exclusively for the purpose of covering the costs referred to in subsection (3).

(5) In the event of any dispute between a medical aid society and a health-care provider as to the level of reimbursement by a society of the expenses incurred in connection with the treatment by a health-care provider of a member who participates in a minimum benefits scheme, the society shall not be liable for more than the expenses that may be incurred for equivalent treatment at a Government or State-aided hospital or Government or State-aided primary health care clinic, or by a specialist or consultant in the circumstances described in paragraph (b) of subsection (3) :

Provided that no society shall be entitled to the limitation of liability referred to in this subsection unless its minimum benefits scheme is in conformity with the requirements of the Second Schedule.

(6) A society which makes available to its members or potential members a minimum benefits scheme may, as an alternative to such scheme, make available to every member or potential member who so wishes, for the benefit of the member and the dependants of such member, a low-cost scheme providing fewer or less favourable benefits than those required to be provided under a minimum benefits scheme in terms of the Second Schedule: Provided that—

- (a) the society concerned shall submit a written application, together with the particulars of the low-cost scheme, to the Secretary for his approval of the scheme;
- (b) the Secretary shall, before deciding whether to approve a low-cost scheme submitted in terms of paragraph (a) consult the medical aid societies advisory council.

### ***12. Minimum membership of medical aid societies***

(1) Subject to this section, no open medical aid society shall be registered if the number of its members is less than two thousand.

(2) An existing or proposed open medical aid society which does not comply with subsection (1) may be registered subject to the condition that the number of its members shall reach the minimum referred to in subsection(1) within the period referred to in subsection (3).

(3) An open medical aid society referred to in subsection (2) shall, within twenty-one days after the 30th June and the 31st December of each year, render a return to the Secretary of the number of its members as at those dates, and if the number of its members has not reached such minimum by the time that it renders its fifth return the society shall have its registration cancelled.

### ***13. Maximum waiting and settlement periods and permissible deductions from benefits***

(1) Subject to subsection(2), a medical aid society may impose a general waiting period of up to three months upon a new member.

Provided that the provision of the following benefits may be made subject to such longer waiting periods, not exceeding two years, as may be specified in relation to the particular benefit in the rules of the scheme concerned— (a) medical treatment related to pregnancy;

- (b) the provision of spectacles or a prosthesis;
- (c) haemodialysis;
- (d) cancer therapy;
- (e) drugs for chronic illnesses;
- (f) medical treatment in another country;
- (g) the provision of such other medical treatment or appliance as the Secretary may specify by notice in the *Gazette* on the recommendation of the medical aid societies advisory council.

(2) A medical aid society may not impose any waiting period upon a new member admitted to a scheme that is equivalent to the one he previously participated in as a member of another society:

Provided that this subsection shall only apply to a person who was a member of the previous society for a continuous period of at least two years and who applies for membership in the new society within three months after the termination of his membership of the previous society.

(3) The maximum settlement period for the reimbursement by a medical aid society of the expenses incurred in respect of medical or dental treatment by a member, the dependants of a member or any health-care provider shall be sixty days from the date of the lodging of the claim in the manner provided by the constitution or rules of the medical aid society:

Provided that in the case of a defective claim the society shall advise the claimant of the defect within sixty days of receiving the claim, and in that event the settlement period shall be thirty days from the date on which the defect is made good.



(4) In the event of any dispute between a society and a health care provider or member as to the amount of any reimbursement claimed—

- (a) the society shall, within the maximum settlement period referred to in subsection (3) or the proviso thereto, meet the claim to the extent it considers reasonable;
- (b) the health-care provider or member, as the case may be, may lodge a complaint in writing with the Secretary in terms of section 31 within fourteen days of receiving the reimbursement.

(5) Unless otherwise agreed between the parties, interest at the rate prescribed in terms of the Prescribed Rate of Interest Act [*Chapter 8:10*] may be charged by a health-care provider on the amount of any claim lodged by that provider which—

- (a) is not settled within the period provided in subsection (3) or the proviso thereto; or
- (b) in the case of a claim in which the amount of reimbursement is disputed, is not dealt with by the society in the manner provided under paragraph (a) of subsection (4).

(6) For the purposes of subsections (3) and (5), a claim or corrected claim shall, unless the contrary is proved, be deemed to have been received by a medical aid society on the fourteenth day after the claimant posted it by means of a prepaid and registered envelope.

(7) A medical aid society may deduct from the benefits payable to a member or to a health-care provider on the member's behalf—

- (a) any amount which has been paid in good faith to the member or provider but to which the member or provider is not entitled; or
- (b) any loss which has been sustained by the society through theft, fraud, negligence or any misconduct on the part of the member or health-care provider which comes to the notice of the society.

(8) A medical aid society which contravenes subsection (3) shall be guilty of an offence and liable to a fine not exceeding level five.

#### ***14. Extent of restriction of member's choice of health services***

(1) Subject to subsection (2), a restricted medical aid society may require that any of its members be treated by a health-care provider employed or retained by it, or at a hospital or specialist medical unit or facility wholly or mainly owned by it.

(2) A society referred to in subsection (1) shall be liable for the expenses incurred by a member who is treated by a health-care provider, or at a hospital, unit or facility, other than one referred to in subsection (1)—

- (a) if such treatment is ordinarily afforded to the member as part of the benefits of the scheme to which he belongs but could not, at the time, be afforded to the member by the provider, or at the hospital, unit or facility, referred to in subsection (1); and
- (b) to the extent that such expenses, do not exceed the expenses for equivalent treatment by the provider, or at a hospital, unit or facility, referred to in subsection (1).

(3) If an open medical aid society invests any of its assets in the business of, or grant loans to, a health-care provider, private or State-aided hospital or specialist medical unit or facility, it shall not require or recommend that any of its members be treated by such provider or at such hospital, unit or facility, nor in any other way make the payment of any benefits to its members conditional upon treatment by such provider or at such hospital, unit or facility.

(4) If any health-care provider, in addition to any health service provided directly by him, owns or has any financial interest in any specialist medical unit or facility, such provider shall not require a member to attend such specialist medical unit or facility to the exclusion of other such units or facilities as may be available.

#### ***15. Complaints to societies by members and health-care providers***

(1) It shall be the duty of every medical aid society to institute a procedure for dealing with complaints by members and health-care providers which ensures that—

- (a) every such complaint is attended to within a reasonable time by a person having the authority to effect any remedial action that may be necessary; and
- (b) the complainant is made aware of his right to complain to the Secretary if the complaint is not remedied:

Provided that the Secretary shall not entertain any complaint before it has been considered by the society unless, in the opinion of the Secretary, the complaint has not been attended to within a reasonable time.

(2) Every complaint by a member or health-care provider in terms of this section shall be in writing in a form provided by the society for the purpose.

(3) A society shall keep a record of every complaint duly made to it in terms of subsection (2) for a period of at least twelve months after it was made, and shall make the record available for inspection at the request of the Secretary.

### **16. Termination, suspension and continuation of membership and benefits**

(1) A medical aid society shall not cancel or suspend a member's membership or that of any of the member's dependants, except On the grounds of—

- (a) failure to pay, within the time allowed in the society's constitution or rules, the membership contribution required by such constitution or rules; or
- (b) failure to repay any debt due to the society; or
- (c) submission of a fraudulent claim; or
- (d) committing any fraudulent act; or
- (e) the non-disclosure of material information specifically requested by the society; or (f) any contravention of section 37.

(2) If a member dies, any dependant of the member shall, subject to payment of the deceased member's subscription being made by or on behalf of the dependant, continue to be entitled to receive the benefits available before the member's death until the remarriage or attainment of the age of majority of the dependant and subject to any other reasonable conditions prescribed by the constitution or rules of the medical aid society.

(3) A member of a restricted medical aid society or of an employee group benefits scheme operated by an open society who retires from the service of his employer or whose employment is terminated by his employer on account of age, ill-health or other disability shall be entitled to continue as a member of the society, subject to the conditions prescribed by the constitution or rules of the medical aid society:

Provided that no society shall require a member to be employed for a minimum period exceeding five years before being permitted to continue as a member after retirement or the termination of his employment in terms of this subsection.

## **PART IIIA**

### **UNFAIR PRACTICES BY HEALTH-CARE PROVIDERS AND SOCIETIES**

[Part IIIA sections 16A to 16E inserted by s.i 35 of 2004.]

#### **16A. Unfair practices by health-care providers in relation to members**

No health-care provider shall do any of the following—

- (a) refuse to provide to any person who produces a valid medical aid card issued to the person or in respect of any dependant of the person named therein, any medical services ordinarily provided by the health-care provider, if the scheme of which the person is a participant covers the costs of the services in question; or
  - (b) demand payment in advance for medical services ordinarily provided by the health-care provider from any person referred to in paragraph (a); or
  - (c) demand from any person referred to in paragraph (a) any payment by way of a consultation fee or deposit or other similar payment howsoever described in excess of—
    - (i) the amount agreed between—
      - A, the National Association of Medical Aid Societies or any successor to that association or any other body recognised by the Minister as representing the interests of medical aid societies; and
      - B. the Zimbabwe Medical Association or any successor to that association or other body recognised by the Minister as representing the interests of medical practitioners;
- or
- (ii) the amount specified by the Minister by notice in the *Gazette*, in the absence of an agreement referred to in subparagraph (i).

[Section inserted by s.i 35 of 2004]

#### **16B. Unfair practices by societies in relation to health-care providers**

No society shall fail to reimburse a health-care provider—

- (a) within the maximum settlement period referred to in subsection (3) of section 13; or
- (b) in the case of a defective claim, within thirty days from the date on which the defect is made good.

[Section inserted by s.i 35 of 2004]

#### **16C. Rectification of unfair practices**

(1) If—

- (a) the Secretary has reason to believe that any health-care provider or society is committing or has committed any unfair practice; or
- (b) any health-care provider is alleged to be committing or to have committed any unfair practice upon a written complaint to the Secretary by—

- (i) the Consumer Council of Zimbabwe; or
  - (ii) any person referred to in section 16A; or
  - (iii) any society; or
- (c) any society is alleged to be committing or to have committed any unfair practice upon a written complaint to the Secretary by a health-care provider; the Secretary or any person authorised by the Secretary in writing shall make such investigation into the suspected unfair practice or complaint as he or she thinks fit.

(2) If, after affording the health-care provider or society being investigated in terms of subsection (1) an opportunity of making representations in the matter, the Secretary or authorised person is satisfied that the health-care provider or society is or has committed any unfair practice, he or she shall serve upon the health-care provider or society a written order in terms of subsection (3).

(3) An order referred to in subsection (2) shall—

(a) in the case of an order served on a health-care provider—

- (i) require the health-care provider to cease immediately to commit the unfair practice or practices in question; and
- (ii) order the reimbursement to any person referred to in section 16A of any payment proved to the satisfaction of the Secretary or authorised person to have been made in contravention of paragraph (b) or (c) of that section;

or

(b) in the case of an order served on a society, order the reimbursement to the health-care provider concerned of any claim proved to the satisfaction of the Secretary or authorised person to be due by the society to the health-care provider, together with interest at the rate prescribed in terms of the Prescribed Rate of Interest Act [*Chapter 8:10*] calculated from the last day when the claim should have been met to the day when the sum claimed is actually reimbursed to the health-care provider.

(4) If any health care provider or society fails to comply with an order made in terms of subsection (3) within fourteen days of the date service of an order (or such longer period as may be specified in the order or as the Secretary or authorised person may, for good cause shown, allow in writing) the health-care provider or society, as the case may be, shall be guilty of an offence and liable to a fine not exceeding level five.

[Section inserted by s.i 35 of 2004]

#### **16D. Additional orders in cases of default**

If any health-care provider or society fails to comply with an order made in terms of subsection (3) of section 16C within fourteen days from the date of service of the order, the Secretary or authorised person may, after consultation with the Minister, and whether or not the health-care provider or society concerned is prosecuted or convicted in terms of subsection (4) of section 16C, serve—

(a) in the case of a complaint against a health-care provider, additional orders on either or both of the following—

- (i) on the health-care provider, withdrawing (where the health-care provider is an individual) any privilege of access to any Government hospital granted to the health-care provider in terms of section 5 of the Act, whether indefinitely or for a stipulated period;
- (ii) on the society that made the original complaint, or of which a person referred to in section 16A is a member, directing the society to deduct from any claim whatsoever made to it by the health-care provider any amount paid in excess of paragraph (b) or (c) of section 16A and to refund it to the person who paid the excess amount;

(b) in the case of a complaint against a society, an additional order suspending the registration of the society in terms of these regulations until it pays the appropriate fee for the renewal of its registration.

[Section inserted by s.i 35 of 2004]

#### **16E. Other offences in connection with unfair practices**

Any—

- (a) society which recovers or attempts to recover from any member or health-care provider any payment required to be made in terms of paragraph (b) of subsection (3) of section 16C; or
- (b) health-care provider who or which attempts to recover from any member or society any payment required to be made in terms of subparagraph (ii) of paragraph (a) of subsection (3) of section 16D; shall be guilty of an offence and liable to a fine not exceeding level five

[Section inserted by s.i 35 of 2004]

### **PART IV**

#### **FINANCIAL MATTERS**

### **17. Solvency and liquidity ratios of medical aid societies**

(1) A medical aid society shall have assets, the aggregate value of which, on any day, is not less than the aggregate of—

- (a) liquid funds equivalent to—
  - (i) the aggregate value on that day of its actual liabilities; and
  - (ii) the amount of all claims sealed by the society in the period of four weeks immediately preceding that day;

and

- (b) accumulated funds equivalent to not less than twenty-five *per centum* of gross annual contributions as shown in the most recent financial statement furnished to the Secretary in terms of section 21.

(2) For the purposes of subparagraph (i) of paragraph (a) of subsection (1), the actual liabilities of a medical aid society shall include—

- (a) the amount which the medical aid society estimates will be payable in respect of claims which have been submitted and assessed but not yet paid; and
- (b) the amount standing to the credit of a member's personal savings account.

(3) For the purposes of paragraph (b) of subsection (1), the accumulated funds of a medical aid society shall—

- (a) comprise assets valued in accordance with international standards on auditing and international accounting standards:

Provided that if the Secretary is satisfied, upon examination of any return rendered in terms of subsection (4) of section 21, that the value of any asset does not reflect a proper value, the Secretary may direct the society to calculate the value in another manner which the Secretary determines will produce a proper value for that asset; and

- (b) not include any asset to the extent to which such asset is pledged or otherwise encumbered.

(4) An existing or proposed medical aid society which does not comply with paragraphs (a) and (b) of subsection (1) may be registered subject to the conditions that—

- (a) its liquid funds shall reach the minimum referred to in subparagraph (ii) of paragraph (a) of subsection (1), within six months of the date on which it was registered or for such further period or periods of six months not exceeding in aggregate twenty-four months from the date of registration as the Secretary may, for good cause shown, allow; and
- (b) its accumulated funds shall reach the minimum referred to in paragraph (b) of subsection (1) within two years of the date on which it was registered.

### **18. Encumbrance and investment of funds of medical aid societies**

(1) For the purpose of paragraph (e) of subsection (4)—

“associate”, in relation to any person or society mentioned in paragraph (a), (b), (c) or (d) of subsection (4), means—

- (a) the subsidiary of such person or society, as defined in section 143 of the Companies Act [*Chapter 24:03*]; or
- (b) any company of which the person or society is the single largest shareholder; or
- (c) the holding company of such person or society, as defined in section 143 of the Companies Act [*Chapter 24:03*]; or
- (d) where the person or society is itself a subsidiary of a holding company, as defined in section 143 of the Companies Act [*Chapter 24:03*], any other such subsidiary of the same holding company; or
- (e) any person who has power, directly or indirectly, to control the person's or society's management or policies.

(2) A medical aid society shall not— (a) encumber its assets; or

- (b) allow its assets to be held by another person on its behalf, other than the State, a local authority, a company listed on the Zimbabwe Stock Exchange, a banking institution registered in terms of the Banking Act [*Chapter 24:20*], a building society registered in terms of the Building Societies Act [*Chapter 24:04*] or a statutory body; or

(c) directly or indirectly borrow money in excess of the amount shown to have been directly or indirectly borrowed in the most recent return rendered to the Secretary in terms of subsection (4) of section 21; or

- (d) by means of suretyship or any other form of personal security, whether under a primary or accessory obligation, give security in relation to obligations between other persons; without the knowledge of the Secretary.

(3) Subject to subsection (4), a medical aid society may invest its funds in any manner provided by its constitution or rules.

(4) A medical aid society shall not invest any of its assets in the business of or grant loans to—

- (a) an employer who participates in the society, other than if that employer is the State, a local authority, a company listed on the Zimbabwe Stock Exchange, a banking institution registered in terms of the Banking Act [Chapter 24:20], a building society registered in terms of the Building Societies Act [Chapter 24:04] or a statutory body;
- (b) any Other society;
- (c) any member of the board or independent administrator of the society;
- (d) any principal officer or employee of the society unless, in the case of the provision of loans, such loans are provided as part of the officer's or employee's remuneration;
- (e) any associate of any person or society mentioned in paragraph (a), (b), (c) or (d).

(5) A medical aid society which invests any of its assets in the business of or grant loans to a health-care provider, private hospital, State-aided hospital or specialist medical unit or facility on terms which enable the provider, hospital, unit or facility in question to enjoy the same exemptions from income tax as are afforded to the society in terms of the Income Tax Act [Chapter 23:06], shall inform the Secretary of the nature and extent of the investment no later than twelve months after the investment was made.

(6) A medical aid society which contravenes subsection (2), (4) or (5) shall be—

- (a) guilty of an offence and liable to a fine not exceeding level five; and
- (b) liable to have its registration cancelled if the offence continues or upon a second conviction for the offence.

#### ***19. Appointment, duties and powers of auditors of medical aid societies***

(1) Subject to this section, every medical aid society shall, after consultation with the audit committee of the society, if any, appoint as its auditor a person who is registered as a public auditor in terms of the Public Accountants and Auditors Act [Chapter 27:12].

(2) No person who is an officer or employee of the society shall be qualified for appointment as an auditor of the society.

(3) A person appointed as auditor of a medical aid society shall be responsible for—

- (a) auditing the society's accounts and reporting on its balance sheet and income and expenditure account; and
- (b) planning and carrying out audit procedures designed to detect irregularities and illegal acts in the conduct of the society's business; and
- (c) communicating to the society's audit committee, if one is appointed in terms of section 20, any evidence he may have that irregularities or illegal acts have been committed in the course of the society's business, whether or not they may have led to material misstatements in the society's accounts or records; and
- (d) communicating to the Secretary any evidence he may have that irregularities or illegal acts have been committed by—
  - (i) any officer or employee of the society; or
  - (ii) any other person, if there is a reasonable possibility that they may significantly damage the society's financial stability.

(4) In every report referred to in paragraph (a) of subsection (3) the auditor shall state whether the accounts of the society concerned fairly present the state of affairs and the business of the society.

(5) Without derogation from subsection (4), in the report referred to in paragraph (a) of subsection (3) the auditor shall record—

- (a) any irregularity or illegal act which he has ascertained, or which he suspects, has occurred in relation to the conduct of the business of the medical aid society; and
- (b) any other matter which, in his opinion, requires rectification or attention by the society; and (c) any recommendations for improving the society's financial administration.

(6) The auditor shall forthwith send to the Secretary a copy of any report in which any matter referred to in subsection (5) is included.

(7) In addition to the report referred to in paragraph (a) of subsection (3), the auditor shall submit to the Secretary such reports as the Secretary may direct.

(8) The Secretary may appoint an auditor for a medical aid society if that society for any reason fails to appoint an auditor, and such auditor shall be deemed to have been appointed by the society.

(9) The auditor of a medical aid society shall comply with his obligations under this section—

- (a) to submit reports or to include information in reports; and

(b) to provide information; notwithstanding any duty of confidentiality to the contrary, and shall not be held liable in any proceedings arising out of compliance with any such obligation unless it is proved that he acted in bad faith.

(10) The auditor of a society shall—

- (a) have a right of access at all reasonable times to such of the society's books, accounts, vouchers and securities; and
- (b) be entitled to require such information and explanations from any officer, employee or agent of the society; as, in his opinion, is required in order to enable him to perform his duties as an auditor.

(11) Any person who fails without just cause—

- (a) to permit an auditor the access referred to in paragraph (a) of subsection (10); or
- (b) to comply with a requirement in terms of paragraph (b) of subsection (10); shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding six months or both.

#### **20. Audit committee**

(1) Subject to subsection (7), the board of a medical aid society shall appoint an audit committee consisting of—

- (a) a chairperson, who shall be a member of the board; and
- (b) at least two other persons, who need not be members of the board.

(2) The chairperson of an audit committee shall not be the independent administrator, principal officer, treasurer or other employee of the society concerned.

(3) The functions of an audit committee shall be—

- (a) to establish appropriate accounting procedures and accounting controls in respect of the conduct of the business of the society; and
- (b) to ensure compliance with the procedures established in terms of paragraph (a); and
- (c) to assist the board to evaluate the adequacy and efficiency of the internal control systems, accounting practices, information systems and auditing processes applied in the day to day management of the business of the society; and
- (d) to introduce such measures as, in its opinion, may enhance the objectivity of financial statements and reports prepared with reference to the business of the society; and
- (e) to recommend to the society the appointment of a suitably qualified person as the auditor of the society.

(4) An audit committee shall meet as often as may be necessary to carry out its functions.

(5) Decisions of an audit committee shall be decided by a majority vote of the members present:

Provided that no member shall abstain from any vote to be taken.

(6) Subject to this section, the procedure to be adopted by an audit committee shall be fixed by the board of the society concerned.

(7) The Secretary may, subject to such conditions as he deems fit, exempt any medical aid society from the requirement to appoint an audit committee if, after consultation with the medical aid societies advisory council, the Secretary is satisfied that the appointment of an audit committee by the society is inappropriate or impractical or would serve no useful purpose.

#### **21. Accounts, financial statements and returns**

(1) A medical aid society shall—

- (a) keep proper accounts and other records relating thereto; and
- (b) at the end of each financial year, prepare financial statements; reflecting, in accordance with sound accounting practices, the society's operations and financial condition.

(2) The board of a medical aid society shall submit to the annual general meeting of members for approval, and furnish to the Secretary copies of, the annual financial statements prepared in terms of paragraph (b) of subsection (1), together with the report of the board of the society, within six months after the end of the financial year to which the statements and the report relate.

(3) The annual financial statements referred to in paragraph (b) of section (1) shall consist of—

- (a) a balance sheet dealing with the state of affairs of the society; and
- (b) an income and expenditure account; and (c) a report by the auditor of the society; and (d) such other returns as the Secretary may require.

(4) A medical aid society shall, within six weeks after the 30th June and the 31st December of each year, render to the Secretary a return certified as correct by the board of the aggregate of its liabilities and liquid and accumulated funds at the close of the last business day of the period of six months ending on the 30th June or the 31st December, as

the case may be, including an analysis of the assets comprising its accumulated funds and the basis of valuation of each asset.

(5) A medical aid society which contravenes subsection (1), (2) or (4), and every officer responsible for the contravention, shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding one year or both.

## PART V

### AMALGAMATION, TRANSFER, DISSOLUTION AND DEREGISTRATION OF MEDICAL AID SOCIETIES

#### **22. Amalgamations and transfers of medical aid societies**

(1) Except with the approval of the Secretary in terms of this section, no medical aid society shall— (a) amalgamate with any other person; or

(b) transfer its business or any part thereof to any other society; or

(c) take transfer from another society of the whole or part of any of its business.

(2) An application for the Secretary's approval of an amalgamation or transfer referred to in subsection (1) shall be made in writing and shall be accompanied by— (a) a statement of the nature of the amalgamation or transfer; and

(b) a copy of the proposed agreement under which the amalgamation or transfer is to be effected; and

(c) copies of the resolutions of the meetings of the societies concerned approving the amalgamation or transfer, certified by the principal officers or independent administrators of the societies concerned.

(3) The Secretary shall cause notice of any application received by him in terms of subsection (2) to be published at the applicant's expense in the *Gazette* and in one or more newspapers circulating in Zimbabwe, and in such notice the Secretary shall—

(a) make such provision for the publication or inspection of the documents submitted with the application as he considers desirable; and

(b) call for objections or representations to be made in regard to the application within such period as may be specified in the notice, which period shall be not less than twenty-one days from the date on which the notice was published in the *Gazette*.

(4) After the expiry of the period referred to in subsection (3) the Secretary shall consider the application, together with any objections or representations received, and if the Secretary is of the opinion that the amalgamation or transfer will not be detrimental to the interests of the majority of the members of the societies concerned or to the public interest, he shall approve it subject to such conditions as he thinks fit.

(5) When an amalgamation or transfer referred to in subsection (1) has been approved by the Secretary in terms of subsection (4), he shall, at the expense of the society or societies on behalf of which the application was made, cause a notice to be published in the *Gazette* and in one or more newspapers circulating in Zimbabwe stating that the amalgamation or transfer has been approved.

(6) On and after the date of the publication of the notice referred to in subsection (5), the agreement effecting the amalgamation or transfer shall be binding on all parties concerned, and shall have effect notwithstanding any conflicting provision contained in the constitution or rules of the medical aid societies concerned.

#### **23. Voluntary and automatic dissolution of medical aid societies**

(1) Upon a resolution by the members that a medical aid society be dissolved or, where the constitution or rules of a society provide that the society be automatically dissolved upon the expiry of a specified period or the occurrence of a specified event, upon the expiry of that period or occurrence of that event, the board of the society shall appoint as liquidator a person or group of persons who shall be approved by the Secretary, and the liquidation shall be deemed to commence as from the date of such approval.

(2) During such liquidation these regulations shall continue to apply to the medical aid society as if the liquidator was the person administering or managing the business of the society.

(3) The liquidator shall, as soon as possible, deposit with the Secretary a preliminary account and a preliminary balance sheet signed and certified by the liquidator as correct, showing the assets and liabilities of the society at the commencement of the liquidation and the manner in which it is proposed to realise the assets and to discharge the liabilities, including any liabilities and contingent liabilities to or in respect of members.

(4) The Secretary may direct the liquidator to furnish a report drawn up by an independent valuator or other competent person nominated by the Secretary.

(5) The preliminary account, preliminary balance sheet and report, if any, referred to in subsections (3) and (4), shall lie open at the office of the Secretary and at the registered office of the medical aid society for inspection by interested persons for a period of thirty days.

(6) The liquidator shall, at the cost of the society concerned, cause to be published in the *Gazette* and in one or more newspapers circulating in Zimbabwe, a notice stating the period during which the documents referred to in subsection (5) shall lie open for inspection as provided in subsection (5), and such notice shall call upon all interested persons who have any objection to anything contained in such documents to lodge their objections in writing with the Secretary within a period stated in the notice, not being less than fourteen days as from the last day on which such documents lie open for inspection.

(7) If no objections are lodged with the Secretary in terms of subsection (6), the Secretary shall direct the liquidator to complete the liquidation.

(8) If any objection is lodged with the Secretary in terms of subsection (6), the Secretary may, after considering the objection direct the liquidator to amend the preliminary account and preliminary balance sheet, or give such other directions not inconsistent with the constitution of the society relating to the liquidation as he thinks fit, and the liquidator shall, within fourteen days of receiving any direction, post a copy thereof to every member and creditor of the society, and the liquidator or any member or creditor who objects to any such direction may apply to a court of competent jurisdiction within twenty-eight days after such direction has been communicated to the liquidator for an order setting aside or varying the direction.

(9) If the Secretary is satisfied that his directions, insofar as they have not been varied or set aside by a court in terms of subsection (8), have been given effect to, the Secretary shall direct the liquidator to complete the liquidation.

(10) Within thirty days after the completion of the liquidation, the liquidator shall lodge with the Secretary a final account and a final balance sheet, signed and certified by the liquidator as correct, showing the assets and liabilities of the society at the commencement of the liquidation and the manner in which the assets have been realised and the liabilities, including any liabilities and contingent liabilities to or in respect of members, have been discharged.

(11) All claims against the society shall be proved to the satisfaction of the liquidator, subject to a right of appeal to a court of competent jurisdiction, and the liquidator may require any claim to be made on affidavit.

(12) If the Secretary is satisfied that the final account and a final balance sheet are correct and that the liquidation has been completed, he shall cancel the registration of the society, and thereupon the society shall be deemed to be dissolved.

(13) Any officer of the society or liquidator who fails to take all reasonable steps to ensure compliance with this section shall be guilty of an offence and liable to a fine not exceeding level five or to imprisonment for a period not exceeding one year or both.

#### ***24. Compulsory winding up of medical aid societies***

Part VI of the Companies Act [*Chapter 24:03*], which provides for the winding up of “unregistered associations” as defined in that Part, shall apply to the compulsory winding up of a medical aid society, except to the extent that the rights and duties of any member upon its compulsory winding up are provided for in the constitution of the society.

#### ***25. Cancellation or variation of registration of societies and measures in lieu of cancellation***

(1) The Secretary may cancel the registration of a medical aid society if, after consultation with the medical aid societies advisory council, he considers that the society (hereafter in this section and in sections 26 and 27 referred to as a “defaulting society”)—

- (a) is in an unsound financial condition and is not operating in accordance with sound administrative and accounting practices and procedures; or
- (b) has failed to comply with the minimum financial requirements prescribed in these regulations and considers that it is unlikely to comply with them.

(2) After consulting the medical aid societies advisory council the Secretary may, instead of cancelling the registration of a defaulting society in terms of subsection (1), or in terms of paragraph (b) of subsection (5) of section 8, paragraph (b) of subsection (3) of section 9, subsection (3) of section 12 or paragraph (b) of subsection (6) of section 18, determine to pursue either one of the following options in relation to the society— (a) place the society under interim management in terms of section 26; or (b) arrange for the transfer of the business of the society in terms of section 27.

(3) Where a petition for the winding up of a society in terms of the Companies Act [*Chapter 24:03*] has been granted or proceedings for that purpose have been commenced, the Secretary shall, unless a provisional order permitting the society’s continued operation is granted in terms of that Act, cancel the registration of the society concerned and not proceed in accordance with paragraph (a) or (b) of subsection (2).

(4) Subject to subsections (5) and (6), the Secretary may at any time vary the registration of a medical society or any term or condition subject to which the society was registered— (a) to correct any error in the register; or

- (b) if the society requests the variation; or
- (c) if the Secretary considers the variation necessary to reflect the true nature of the service which the society is providing; or



(d) if for any other reason the Secretary considers the variation necessary or desirable in the public interest.

(5) Before varying the registration of a society in terms of subsection (4), otherwise than at the request of the society, the Secretary shall notify the society in writing of the nature of the variation he proposes to make and of his reasons for wishing to make the variation, and shall give the society an adequate opportunity to make representations in the matter.

(6) if the Secretary refuses to vary the registration of a society at the request of the society, he shall, within ten days after reaching his decision, notify the society in writing of his decision and of the reasons for it.

#### ***26. Interim management of medical aid society***

(1) Subject to subsection (2), where, after consultation with the medical aid societies advisory council, the Secretary determines that the option referred to in paragraph (a) of subsection (2) of section 25 is appropriate in relation to a defaulting society, he shall issue a written direction to the board of the society to convene a special meeting of members presided over by the Secretary or any official of the Ministry appointed in writing by the Secretary at a specified time (no later than thirty days after the issue of the direction) and place for the purpose of voting upon the following proposal—

(a) that the board of the society should be dissolved; and

(b) that an interim manager vested with all the powers of the board and the principal officer or independent administrator should be appointed by the members or the Secretary to manage the affairs of the society for the period (not exceeding twelve months) specified in the direction.

(2) Before issuing a direction in terms of subsection (1) the Secretary shall inform the board concerned of his intention to do so and the reasons for forming that intention, and shall afford the board a reasonable opportunity to make representations in the matter:

Provided that the Secretary need not comply with this subsection if, in his opinion, to do so would permit the board concerned or any other person to dispose of any of the defaulting society's assets or take any other action that would prejudice the society's members or creditors.

(3) If, having received a direction in terms of subsection (1), the board fails or refuses to convene the meeting within the time specified in the direction, the Secretary shall cause to be published in the *Gazette* and in one or more issues of a newspaper circulating in the area in which the defaulting society conducts business, a notice inviting the members of the defaulting society to a special meeting of the society at a specified time (no later than thirty days after the first publication of the notice) and place for the purpose of voting upon the proposal referred to in subsection (1).

(4) If a quorum is not present at the special meeting of members convened in terms of subsection (1), the Secretary or person presiding shall, subject to at least twenty-four hours' written or verbal notice to every member, adjourn the meeting to a date not more than seven days later.

(5) At the special meeting of members convened in terms of subsection (1) or (4) the Secretary or person presiding shall afford any officer of the defaulting society a reasonable opportunity to make representations to the members at the meeting on the matter for which the meeting was convened.

(6) If at a special meeting convened in terms of subsection (1) or (4) the members resolve that the board of the defaulting society should be dissolved and an interim manager appointed in its place, but fail or decline to make the appointment, the Secretary or person presiding shall, with the leave of the members, appoint the interim manager, who may be a person who is not a member of the society.

(7) Before the end of the period for which an interim manager was elected or appointed in terms of subsection (6), the interim manager shall convene a special or general meeting of members for the purpose of electing or appointing a new board of the society, whereupon the interim manager shall vacate office:

Provided that if the interim manager reports to the Secretary in writing that, in his opinion, there is no reasonable prospect of restoring the society to a sound financial condition, and the interim manager recommends the cancellation of the registration of the society or the transfer of its business in terms of section 27, the Secretary may cancel the registration of the society or proceed in terms of section 27.

(8) If at a special meeting convened in terms of subsection (1) or (4) the members vote against the proposal put to them in terms of subsection (1), or a quorum is not present at a meeting convened in terms of subsection (4), the Secretary may proceed to cancel the registration of the society or adopt such other course of action as he deems fit in the circumstances.

#### ***27. Transfer of business of medical aid society in lieu of deregistration***

(1) Where, after consultation with the medical aid societies advisory council, the Secretary determines that the option referred to in paragraph (b) of subsection (2) of section 25 is appropriate in relation to a defaulting society, he shall invite offers from any registered medical aid society or consortium of societies (hereafter in this section called

“the proposed transferee”) to take transfer of the business of the society in accordance with a scheme of transfer proposed by the transferee, the terms of which shall not be less favourable than those described in subsection (2).

(2) The terms referred to in subsection (1) are that the proposed transferee shall—

- (a) in exchange for the assets of the defaulting society, take transfer of all the liabilities of that society, including liabilities to health-care providers and members under claims which have been submitted and assessed but not yet paid as at a date (hereafter in this section called “the cut-off date”) not earlier than three months before the date on which the Secretary approved the scheme of transfer, but not including—
  - (i) contingent liabilities in respect of members of the defaulting society which may accrue after the cutoff date; and
  - (ii) liabilities for which an officer of the defaulting society may be held personally liable by reason of fraudulent conduct or any other cause;
- (b) undertake to admit every member of the defaulting society who, between the cut-off date and the date on which notice of the transfer is published in terms of subsection (5) of section 22, wishes to be admitted as a member of the proposed transferee’s minimum benefits or low-cost scheme, if it operates such scheme, on payment of the appropriate contribution;
- (c) waive any waiting period in relation to a person referred to in paragraph (b) who has been a member of the defaulting society for a period of at least twelve months;
- (d) waive any waiting period in relation to a member of the defaulting society who—
  - (i) has been a member of the defaulting society for a period of at least twelve months; and
  - (ii) applies within the period referred to in paragraph (b) to participate in any scheme other than the minimum benefits or low-cost scheme of the proposed transferee; and (iii) qualifies to participate in a scheme referred to in subparagraph (ii).

(3) Subject to paragraph (a) of subsection (4), the Secretary shall, if he approves any one or more schemes of transfer proposed in terms of subsection (1), issue a written direction to—

(a) the board of the defaulting society concerned; or

(b) the interim manager of the society appointed in terms of section 26; as the case maybe, to convene a special meeting of members presided over by the Secretary or any official of the Ministry appointed in writing by him at a specified time (no later than thirty days after the issue of the direction) and place for the purpose of voting upon the question whether the proposed transferee, or any of the proposed transferees where there are two or more proposed transferees, should take transfer of the business and assets of the society in accordance with any of the schemes of transfer proposed by the transferee or transferees.

(4) The provisions of—

(a) subsections (2) and (3) of section 26, shall apply where a direction is issued in terms of paragraph (a) of subsection (3);

(b) subsections (3), (4) and (8) of section 26, shall apply to a special meeting convened in terms of subsection (3);

in the same way that they apply to a direction issued, or special meeting convened, in terms of section 26.

(5) If at a special meeting convened in terms of this section the members resolve that the proposed transferee, or any one of the proposed transferees, shall take transfer of the business of the society in accordance with the scheme of transfer proposed by it, the Secretary shall, at the earliest opportunity, cause notice of the proposed scheme of transfer to be published in the same manner as a notice of an application for approval of an amalgamation or transfer in terms of subsection (3) of section 22, and subsections (4), (5) and (6) of that section shall, with necessary modifications, apply in relation to the scheme of transfer.

## PART VI

### ADVISORY COUNCILS

#### ***28. Establishment, composition and functions of advisory council***

(1) The Minister shall establish the following advisory councils—

(a) the medical aid societies advisory council, which shall consist of—

- (i) representatives chosen by registered open medical aid societies, each of which shall be entitled to choose one representative; and
- (ii) representatives of restricted medical aid societies equal in number to the representatives chosen under subparagraphs (i), of whom—

- A. one shall be chosen by any association of municipal and town councils recognised by the Minister for the purpose of representing societies established or maintained in terms of section 147 of the Urban Councils Act [*Chapter 29:15*]; and
  - B. the remainder shall be elected by the other registered restricted societies from a list of nominations submitted by them to the Minister, each of which shall be entitled to make one nomination;
- (b) the joint advisory council, which shall consist of the members of medical aid societies advisory council and—
- (i) two members of the Health Professions Authority established in terms of the Health Professions Act [*Chapter 27:19*] who are not medical practitioners, appointed by the President of the Authority; and
  - (ii) one health practitioner appointed by the Medical and Dental Practitioners Council established in terms of the Health Professions Act [*Chapter 27:19*]; and
  - (iii) one nurse appointed by the Nurses Council of Zimbabwe established in terms of the Health Professions Act [*Chapter 27:19*]; and
  - (iv) one person appointed by the hospitals advisory council established in terms of the Medical Services (Government and Private Hospitals) Regulations, 2000; and
  - (v) one person appointed by the Consumer Council of Zimbabwe; and
  - (vi) one person chosen from a list of names submitted by bodies which the Minister considers are representative of trade unions; and
  - (vii) one person chosen from a list of names submitted by bodies which the Minister considers are representative of employers organisations; and
  - (viii) such additional members appointed by the Minister as may need to be appointed to secure that, on the one hand, medical aid societies and, on the other hand, health-care providers and consumers are equally represented on the joint advisory council:

Provided that in making any appointments under this subparagraph the Minister shall consult with the medical aid societies advisory council and the members of the joint advisory council appointed in terms of subparagraphs (i) to (vii).

(2) If any organisation, person or group of persons fails, neglects or refuses to submit any names or make any nomination or appointment for the purposes of paragraph (a) or (b) of subsection (1), the Minister may in terms of the appropriate paragraph appoint any person, whether that person is qualified in terms of that paragraph or not, whom he thinks fit to be a member.

(3) Two persons appointed by the Secretary to represent the Ministry of Health shall be the chairperson and deputy chairperson respectively of each council:

Provided that neither shall have a vote on any question before the council except in the case of tied vote, in which event the chairperson or deputy chairperson (whoever is presiding at the meeting) shall have a casting vote.

(4) The deputy chairperson of each council shall act as chairperson during any period that the chairperson is unable to exercise his functions as chairperson.

(5) Each council shall designate a person (whether or not a member of the council concerned) to act as secretary of the council.

(6) A member of an advisory council may, in writing to the chairperson, nominate a person as an alternate member, and any such alternate member may act as a member during any period that the substantive member is unable to exercise his functions.

(7) The functions of—

- (a) the medical aid societies advisory council shall be to perform such functions as are required to be performed by it in terms of these regulations and generally to advise the Secretary on all matters concerned with the application of these regulations;
- (b) the joint advisory council shall be to perform such functions as are required to be performed by it in terms of these regulations and generally to advise the Secretary on matters of mutual concern to both medical aid societies and health-care providers and consumers.

### **29. Meetings of advisory councils**

(1) Each council shall hold its first meeting on such date and at such place as the Minister may fix and thereafter ordinary meetings shall be held at such time and place as the chairperson shall decide on not less than thirty days' written notice, including an agenda, given to every member:

Provided that an ordinary meeting of the medical aid societies advisory council shall be held at least twice a year.

(2) Subject to this section, each council shall adjourn, close and otherwise regulate its meetings and procedure as it thinks fit.

(3) A special meeting of—

- (a) the medical aid societies advisory council may be held' at the written request of a simple majority of the members;
- (b) the joint advisory council may be held at the written request of a simple majority of the members of the medical aid societies advisory council, or a simple majority of the other members of the joint advisory council; on not less than fourteen days' written notice, including an agenda, given to every member.

(4) If, in the opinion of the chairperson, special circumstances so require, the chairperson may convene an emergency meeting of either council on twenty-four hours' written or verbal notice to every member of the council.

(5) The quorum for any meeting of the council shall be a majority of the members of the council:

Provided that if a quorum is not present at any special or emergency meeting of the council, the meeting shall, subject to at least twenty-four hours' written or verbal notice to every member, be adjourned to a date not more than seven days later, and the quorum at such adjourned meeting shall be three members.

(6) The decisions of a council shall, as far as possible, be made by consensus.

(7) In the absence of consensus on any matter, the chairperson of the council shall put the matter to the council for a vote at a meeting of the council at which a quorum is present:

Provided that the chairperson shall not be bound by the outcome of any such vote unless it is a matter which, in terms of these regulations, requires the determination of the council concerned.

(8) Any proposal which the chairperson desires should be decided by a council may be circulated by the chairperson among all members of the council concerned and, if it is agreed or, in the case of any proposal recommended by the chairperson, not objected to by a majority of them on or before a specified date, the proposal shall be of the same effect as a resolution passed at a duly constituted meeting of the council.

(9) In exercising his functions in terms of this Part, the chairperson shall act in accordance with any instructions or terms of reference given to him by the Secretary.

## **PART VI**

### **GENERAL**

#### ***30. Appeals***

(1) Any person who is aggrieved by a decision of the Secretary—

- (a) to reject an application for the registration of a medical aid society in terms section 4; or
- (b) to cancel the registration of a medical aid society in terms of paragraph (b) of subsection (5) of section 8, paragraph (b) of subsection (3) of section 9, subsection (3) of section 12, paragraph (b) of subsection (6) of section 18, subsection (1) of section 25 or subparagraph (ii) of paragraph (a) of subsection (2) of section 32; or
- (c) to vary or refuse to vary the registration of a medical aid society in terms of subsection (4) of section 25;

may appeal through the Secretary to the Minister in writing, giving the grounds for the appeal, within thirty days of being notified of the Secretary's decision.

(2) The Minister may, before deciding an appeal lodged in terms of subsection (1), request the appellant and the Secretary to make such further written or oral submissions in connection with the appeal as he considers will be of assistance in determining the appeal.

(3) The period between the lodging of the appeal in terms of subsection (1) and its determination shall exceed sixty days, and if the appeal has not been determined after that period it shall be deemed (except in the case of an appeal against the rejection of an application for registration) to have been determined in favour of the appellant

#### ***31. Complaints referred to the Secretary***

(1) Upon receiving a complaint—

- (a) in terms of paragraph (b) of subsection (4) of section 13, the Secretary shall refer the matter to the joint advisory council for its determination, and shall inform the complainant and the society concerned in writing of the council's determination as soon as practicable after it is made: Provided that—
  - (i) the council may decline to determine the matter, in which case the complaint shall fail;
  - (ii) where the council determines the matter, its determination shall bind only the parties concerned in the complaint and not be applicable to similar cases or to all societies;
- (b) in terms of paragraph (b) of subsection (1) of section 15, the Secretary shall, if he considers the complaint to be justified, take such action to resolve it as he is lawfully empowered to take after affording the society concerned an opportunity to make representations on the matter.

(2) The Secretary may in writing delegate his functions under subsection (1) to any member of the Public Service employed in the Ministry of Health.

### ***32. Codes of practice***

(1) The Secretary may, in consultation with the medical aid societies advisory council and, in respect of matters of mutual concern to both medical aid societies and health-care providers and consumers, the joint advisory council, devise one or more codes of practice regulating the conduct of—

(a) medical aid societies as between each other and in relation to the public; (b) health-care providers in relation to medical aid societies and members of societies; (c) medical aid brokers or consultants.

(2) Any code of practice may provide for penalties for breaches of the code which, in the case of breaches committed by—

(a) a medical aid society, may include—

- (i) a monetary penalty not exceeding level five; or
- (ii) the cancellation or variation of the registration of the medical aid society concerned;

(b) a health-care provider or a medical aid broker or consultant, may include disqualification from supplying or providing any service to members or medical aid societies which qualifies for reimbursement by a society for any specified period.

### ***33. Existing societies to comply with regulations***

(1) For the purpose of securing equal compliance with these regulations by all registered medical aid societies, every existing society shall, no later than three months from the date of commencement of these regulations, transmit to the Secretary—

- (a) the particulars of the society required to be recorded in the register referred to in subsection (1) of section 3; and
- (b) two copies of the society's constitution and any rules of the society; and
- (c) the particulars of the society's principal officer or independent administrator required by Part II of the form prescribed in the First Schedule, as completed by the principal officer or independent administrator; and
- (d) a true copy, certified by the chairperson of the board and the auditor of the society, of the balance sheet (showing accumulated funds) and income and expenditure account of the society for the preceding financial year of the society, as submitted to the annual general meeting of members; and
- (e) the name and address of the society's auditor; and the nature and extent of any investment referred to in subsection (5) of section 18.

(2) No later than twelve months from the date of commencement of these regulations and to such extent as may be necessary, every existing society shall bring its constitution or rules into conformity with the requirements of section 10.

(3) An existing society which contravenes subsection (1) or (2) shall be guilty of an offence and liable to a fine not exceeding level five.

### ***34. Existing low-cost schemes operated by restricted societies***

(1) An existing restricted medical aid society which, immediately before the date of commencement of these regulations, operated any low-cost scheme, whether or not in conjunction with or as an alternative to a minimum benefits scheme, shall no later than three months from the commencement of these regulations, make application in terms of proviso (i) to subsection (6) of section 11 for approval of the scheme.

(2) If the Secretary, after consultation with the medical aid societies advisory council, considers that a low-cost scheme referred to in subsection (1) does not provide adequate benefits for its members, the Secretary shall permit the society to continue to operate the scheme subject to the condition that, no later than three years from the date of commencement of these regulations, the society shall revise such scheme so that it upgrades its benefits to a level and in a manner specified by the Secretary.

(3) A society referred to in subsection (2) shall, no later than three months from the date of the qualified approval of its scheme, and thereafter at such intervals of not less than six months at a time as the Secretary may require, furnish to the Secretary written particulars of the low-cost scheme.

### ***35. Extension and condonation of non-compliance with time limits***

The Secretary may, for good cause shown, extend or condone any non-compliance with the time limits prescribed by or under the following provisions—

Sections 7 (2) and (5), 8 (3) (b), 10(3), 12 (3), 21(2) and (4), 23 (8) and (10), 30 (1), 33 (1) and (2) and 34 (1) and (2).

**36. False statements, etc.**

Any person who in any form, return, report or other document required by these regulations to be submitted to the Secretary makes a statement that is false in a material particular, knowing the statement to be false or not having reasonable grounds for believing it to be true, shall be guilty of an offence and liable—

- (a) in the case of an individual, to a fine not exceeding level five or to imprisonment a period not exceeding one year or both; or
- (b) in the case of a medical aid society or other body corporate, to a fine not exceeding level five.

**37. Multiple claims prohibited**

(1) No person shall, in respect of the same treatment—

- (a) knowingly claim from a medical aid society the reimbursement of expenses which that society has already reimbursed; or
- (b) knowingly claim payment or accept benefits from more than one medical aid society in respect of the same treatment, medication or other service supplied by a health-care provider.

(2) A person who contravenes paragraph (a) or (b) of subsection (1) shall be guilty of an offence and be liable to a fine not exceeding level five or imprisonment for a period not exceeding one year or both.

**FIRST SCHEDULE (Sections 4(1), 7(5) (b) and 33(1) (c)**

**APPLICATION FOR REGISTRATION AS A MEDICAL AID SOCIETY**

*Instructions on how to complete this form*

- Attach annexures wherever necessary.
- Do not leave any question blank or unanswered: where necessary answer “Not applicable” or “Not known”.
- Upon completion the original of this form and supporting annexures shall be submitted to:

The Secretary,  
Ministry of Health and Child Welfare,  
P.O. Box CY 1122 Causeway.

- All inquiries concerning this form should be directed to the Secretary.

**PRELIMINARY**

State the name, address and telephone number of the person(s) who may be contacted regarding any questions in respect of this application:

.....

.....

.....

.....

**PART I: PARTICULARS OF APPLICANT MEDICAL AID SOCIETY**

1. Name under which applicant medical aid society (“the applicant”) seeks registration:
2. Legal form of the medical aid society (trust/common law association/company limited by guarantee/provident fund registered in terms of the Pension and Provident Funds Act [*Chapter 24:09*] other [*specify*] and date of incorporation or formation
3. Address of applicant’s head office
4. Names, address and occupations of directors or trustees

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5. Name and address of principal officer.....

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6. Name and address of chief accounting officer.....

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7. Number of members and estimated number of dependants of members as as at the date of the applica-  
tion.....

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8. Name, address and qualifications of the applicant's auditors (in the case of a partnership give the name of the  
partnership and of the partner principally responsible for the audit of the applicant)

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9. Provide details of applicant's past and present membership of or affiliation to any association concerned with  
medical aid societies in Zimbabwe or elsewhere, including details of any refusal, termination or lapsing of  
such membership or affiliation and the reasons therefor.

10. Is any director or trustee of the applicant a director or trustee of another medical aid society which carries on  
business in Zimbabwe? Yes/No. If yes, provide details.

11. Has the applicant or any director or trustee of the applicant ever, under the law of any country—

- (a) been adjudged or otherwise declared insolvent or bankrupt and has not been rehabilitated or discharged; Yes/No. or
- (b) made an assignment to, or arrangement or composition with, his creditors which has not been rescinded or set aside; Yes/No. or
- (c) been convicted of theft, fraud, forgery, uttering a forged document or perjury or any other offence, by whatever name called, that is similar to any of those offences; Yes/No. or

- (d) been convicted of any offence and sentenced to a term of imprisonment exceeding six months, imposed otherwise than as an alternative to or in default of payment of a fine, and has not received a free pardon? Yes/No. If the answer to any of these questions is yes, provide details.

*Declaration*

We, the undersigned principal officer and members of the Board of the applicant, do hereby certify that—

- (i) all information given in response to and in support of the questions and items in this Part of this application is true and correct to the best of our knowledge and belief;
- (ii) this application is made in good faith with the purpose and intent that the affairs and business of the applicant will at all times be honestly conducted in accordance with good and sound business principles and in full-compliance with all applicable laws.

Chairperson of the Board (print name) .....

Signature

Principal Officer (print name) .....

*Signature*

Director/Trustee (print name) .....

Signature

Director/Trustee (print name) .....

*Signature*

Director/Trustee (print name) .....

*Signature*

Director/Trustee (print name) .....

*Signature*

**PART II**

PARTICULARS OF PRINCIPAL OFFICER/INDEPENDENT ADMINISTRATOR

12. Name and address of principal officer/independent administrator (address of head office in the case of a corporate administrator):

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 .....

13. In the case of a corporate independent administrator, names and addresses of the directors of the administrator

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 .....  
 .....  
 .....

14. Professional and academic qualifications and employment history (for the past 5 years, listing, in reverse chronological order, the name and address of the employer, the nature or type of business, the job title and



duties, the date employed and reasons for leaving) of the principal officer/independent administrator or, in the case of a corporate independent administrator, of each director of the independent administrator.

15. Does the principal officer/independent administrator act in the capacity of a principal officer/independent administrator, or member of the board, of any other medical aid society? Yes/No. If yes, provide details.
16. Has the principal officer/independent administrator or, in the case of a corporate independent administrator, any director of the administrator ever, under the law of any country—
  - (a) been adjudged or otherwise declared insolvent or bankrupt and has not been rehabilitated or discharged; Yes/No. or
  - (b) made an assignment to, or arrangement or composition with, his creditors which has not been rescinded or set aside; Yes/No. or
  - (c) been convicted of theft, fraud, forgery, uttering a forged document or perjury or any other offence, by whatever name called, that is similar to any of those offences; Yes/No. or
  - (d) been convicted of any offence and sentenced to a term of imprisonment exceeding six months, imposed otherwise than as an alternative to or in default of payment of a fine, and has not received a free pardon? Yes/No.

If the answer to any of these questions is yes, provide details.

*Declaration by principal officer/independent administrator*

I, the undersigned, do hereby certify that all information given in response to and in support of the questions and items in Part II of this application is true and correct to the best of my knowledge and belief.

.....  
*Signature and date (in the case of a corporate administrator, every director of the administrator shall append and date his or her signature)*

**SECOND SCHEDULE (Proviso to Section 11(5))**

**MINIMUM REQUIREMENTS OF MINIMUM BENEFITS SCHEME FOR PURPOSES OF THE  
PROVISO TO SECTION 11(5)**

1. For the avoidance of doubt, the medical services referred to in section 11(2) shall include the following, subject to such minimum or maximum cost in respect of each service or all services as the Secretary may, after consultation with the joint advisory council, specify by notice in the *Gazette*—
  - (a) the physical or mental examination of a member or dependant of the member;
  - (b) the diagnosis, treatment, or prevention of, or giving of aid in relation to, any physical or mental defect, illness or deficiency of a member or dependant of the member;
  - (c) the giving of advice in relation to, or treatment of any condition arising out of, the pregnancy of a member or dependant of the member;
  - (d) the supplying on the premises of a Government or State-aided hospital or Government or State-aided primary health-care clinic of any medicine, appliance or apparatus in relation to any such defect, illness or deficiency, or a pregnancy, of a member or dependant of the member;
  - (e) nursing or midwifery services for the benefit of a member or dependant of the member; (f) hospital treatment of a member or dependant of the member, that is—
    - (i) accommodation as an in-patient at a Government or State-aided hospital for such period as the scheme may specify; and
    - (ii) surgery involving the administration of a general or local anaesthetic.
2. In addition a medical aid society may, at a premium to the contribution payable for the minimum benefits scheme, make available to every member or potential member who so wishes, for the benefit of the member and the dependants of such member, an optional benefit covering—
  - (a) not less than half the cost of any medicine, appliance or apparatus prescribed and supplied off the premises of a Government or State-aided hospital or Government or State-aided primary health-care clinic; or
  - (b) the cost of specified medicines, appliances or apparatus prescribed and supplied off the premises of a Government or State-aided hospital or Government or State-aided primary health-care clinic as itemised by the society in a list approved by the Secretary after consultation with the joint advisory council:

Provided that the Secretary may, after consultation with the joint advisory council, specify by notice in the *Gazette* a standard list for the purposes of this subparagraph.

3. A medical aid society shall not include benefits in its minimum benefits scheme which are more favourable than those provided for in this section except by way of enhanced or additional options.
4. In fixing the contribution payable by a person for admission and continuance as a member of a medical aid society for the purpose of the minimum benefits scheme, regard may be had to the following factors—
  - (a) the income and number of dependants of such person; and
  - (b) the past and present health of such person; and
  - (c) the age of such person, if he joins the scheme after the age of sixty years; but not to any other factor, including the sex of such person or the age or sex of any of such person's dependants.
5. With a view to reducing the level of the contribution payable towards a minimum benefits scheme the Minister may, with the agreement of the medical aid societies advisory council, devise a uniform minimum benefits scheme to be made available by every registered medical aid society for a uniform contribution (or as nearly uniform as is practicable) to every member or potential member who wishes to join the scheme, for the benefit of the member and the dependants of such member.

### **THIRD SCHEDULE (Section 2)**

#### **FEES**

[Schedule inserted by s.i 35 of 2004]

<i>Type of registration</i>	<i>Fee</i>
	\$
Application for registration of an open medical aid society	
Application fee	500 000,00
Registration fee	1 000 000,00
Application for registration of a restricted medical aid society	
Application fee	250 000,00
Registration fee	500 000,00
Renewal of registration of an open medical aid society	500 000,00
Renewal of registration of a restricted medical aid society	250 000,00

### **FOURTH SCHEDULE (Section 6A)**

#### **APPLICATION FOR RENEWAL OF REGISTRATION AS A MEDICAL AID SOCIETY**

[Schedule inserted by s.i 35 of 2004]

#### *Instructions on how to complete this form* □

Attach annexures wherever necessary.

- Do not leave any questions blank or unanswered: where necessary answer “Not applicable” or “Not known”.
- The Secretary may request the applicant to submit a new application for registration if he or she considers that any changes to the particulars supplied in the previous or original application are material.
- Upon completion the original of this form and supporting annexures shall be submitted to:

The Secretary  
Ministry of Health and Child Welfare  
P Box CY 1122

- All inquiries concerning this form should be directed to the Secretary at the above address.

1. State the name, address and telephone number of the person(s) who may be contacted regarding any questions in respect of this application:

.....  
.....

2. Name, address of head office, mailing address and type of applicant for renewal of registration.

.....  
.....

3. Have there been any changes to the particulars supplied in the previous or original application for registration?  
Yes/No. If yes, provide details

.....  
.....