

Survey on Medical Aid Schemes - 2018

Majority of non-subscribers are willing to subscribe; but Cost is key

The primary research survey sought to capture the perceptions of consumers of medical aid offerings and provide insights on this sector. Selecting a medical aid provider is not a light matter and clients often find themselves very satisfied or short-changed with their medical aid provider. Sample size is 1,474 respondents limited to the Gaborone area. The outcome summarized below applies to <20% of the population who are covered by the commercial medical aid schemes. This also presents an opportunity of the public to explore the option of actually selecting a medical aid scheme from the pool of benefit options.

Insights



- Less than one-third of respondents are subscribed to medical aid. This can be influenced by age of respondents and whether they are gainfully employed.
- Data indicates membership classification almost equally distributed between principal member and beneficiaries.
- Majority of non-subscribers are willing to subscribe to a medical aid – which presents an opportunity to medical aid providers.
- Vast majority would like to get back their unused premiums in form of cash or health screening & gym membership.
- The data indicated that a majority of subscribers do not double check their medical bills before signing them and of those whom “never” double check are mostly dependent members.

Innovation



- One of the key questions that the survey included was willingness for people to use health-tracking gadgets in exchange for benefits from their medical aid scheme.
- More than 80% of people are willing to share their health data for lower premiums.

Decision making



- Amongst people covered by medical aid as well as those not covered, key factors driving decision to subscribe are Cost and Benefits/ Options (85%) – followed by quality of healthcare from approved service providers.
- More than 75% are either satisfied or extremely satisfied with their medical aid providers.

Henry Ford once said, “If I’d asked customers what they wanted, they would have told me, “A faster horse!”

¹ Cali, Jonathan; Carlos Avila. 2016. Health Financing in Botswana: A Landscape Analysis. Bethesda, MD: Health Finance and Governance Project, Abt Associates Inc.

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