



ANNUAL  
GENERAL MEETING

**CHARLOTTE MBEWU**  
**PRINCIPAL OFFICER**

25 JUNE 2026





Our purpose is to

**Care for our members' health  
and wellness** by engaging the brightest minds and  
innovative solutions to provide access to

affordable, equitable and quality, value-based healthcare  
that meets their needs **now and into the future**



# AGENDA

## > 01

### Care for our members' health and wellness

*Healthcare is evolving rapidly, shaped by changing disease patterns, rising demand and opportunities to improve health outcomes*

## > 02

### Delivering equitable access

*Sound governance, responsible stewardship and active engagement ensures continued access to quality care*

## > 03

### Affordable healthcare

*Disciplined financial management, operational efficiency and sustainable growth support long-term member affordability*

## > 04

### Quality, value-based care

*Delivering the highest quality of care and support across each member's healthcare journey*

## > 05

### Now and into the future

*Investing in innovation to deliver precise, personal and effective healthcare for members*





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# Demand for quality healthcare has remained resilient in the face of significant economic headwinds

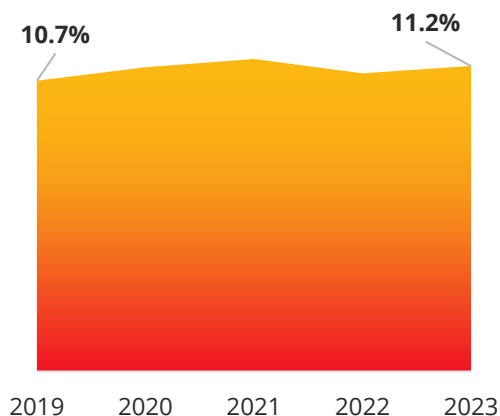


## AFFORDABILITY PRESSURES PERSIST

**~11%**

of income spent on medical aid contributions

### Contributions as % of main members' salary



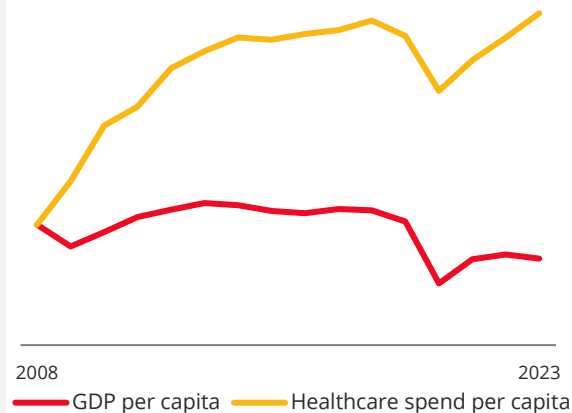
## HEALTHCARE SPEND HAS OUTPACED GROWTH

**6X**

increase in healthcare spend ahead of GDP per capita

### Healthcare spend and GDP per capita in South Africa

(indexed to 2008)



## LOW GROWTH HAS YET TO DRIVE EMPLOYMENT

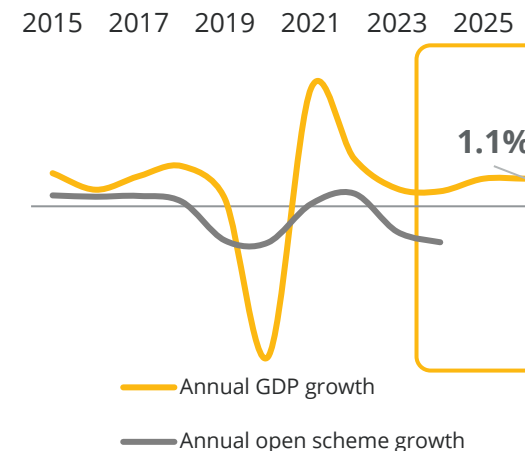
**6**

Consecutive quarters of GDP growth

**45.6%**

Unemployment rate for ages 15-34

### Improved growth has not yet translated to employment recovery

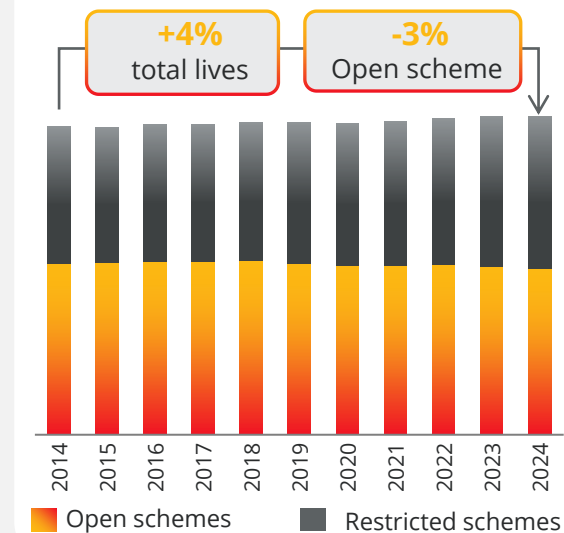


## STAGNANT OPEN SCHEME GROWTH

**+4%**

Growth in total scheme lives

### Total medical scheme beneficiaries

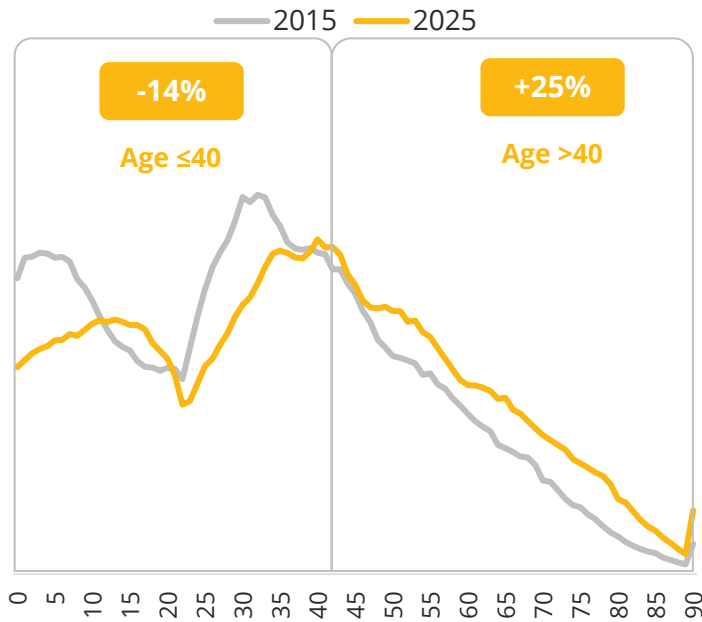


# Ageing membership increases disease burden, utilisation and costs



## DHMS MEMBERSHIP IS CHANGING

### DHMS membership aged over past 10 years



DHMS is attracting younger new joiners than open scheme industry on average

**27.3 years**

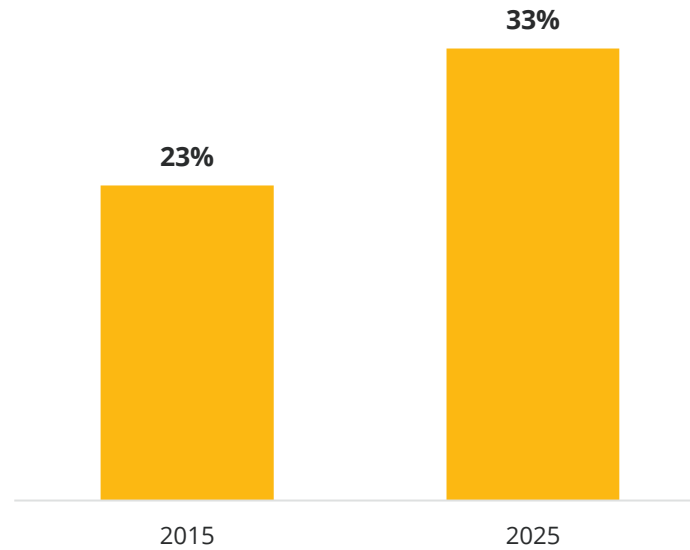
DHMS

**27.8 years**

Open medical scheme industry\*

## RISING CHRONIC DISEASE PROFILE

### Increase in chronicity rate over time

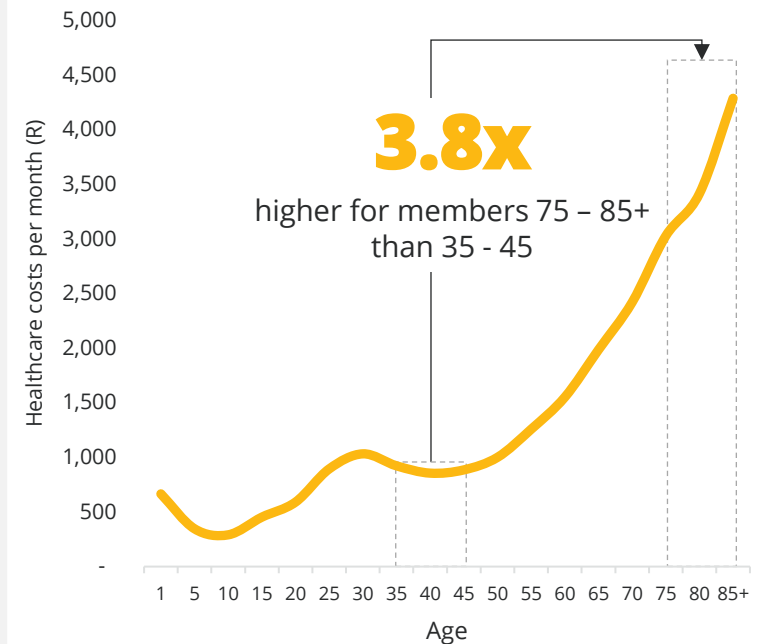


### Four conditions driving chronic care



## EFFECTS OF EVOLVING PROFILE ON HEALTHCARE COSTS

### Healthcare costs increase with age



### Healthcare utilisation comparison of members aged 75 - 85+ vs. 35 - 45

**2.0x**

Higher medicine cost

**2.4x**

Higher admission rates

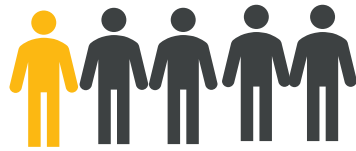
\*Open medical scheme industry excludes DHMS. Calculation based on published CMS industry data for 2024

Healthcare costs are based on DHMS data for members without a chronic condition. The data has been standardised for plan mix to isolate the effect of age, thereby removing the influence of both plan selection and chronic conditions on costs.

# The opportunity to improve outcomes lies in prevention, early detection and proactive care



## HEALTHY HABITS CAN MATERIALLY REDUCE CARDIOVASCULAR RISKS



**1 in every 5 members**

live with a cardiovascular disease

### Earlier action can improve health trajectory

Cardiovascular conditions can be improved through better management & lifestyle choices



**36%**

Smoking cessation



**27%**

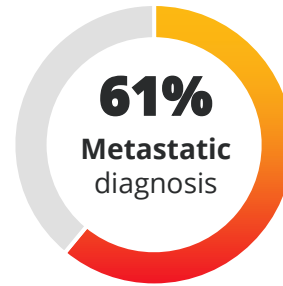
Physical activity



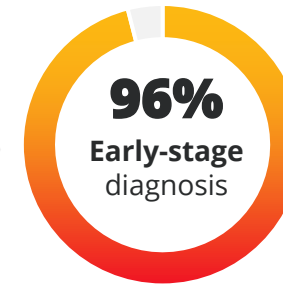
**26%**

LDL reduction

## EARLY DETECTION FUNDAMENTALLY IMPROVES CANCER OUTCOMES



**1.57X**  
Improvement in survival rate



Breast cancer 5-year survival rates

### Cancer outcomes continue to improve

Earlier detection, a wider range of treatment options and advances in disease management help members live longer



**7.1 years**

improvement in life expectancy



**48%**

reduction in mortality



**3X**

Increase in novel treatment access





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*Investing in innovation to deliver precise, personal and effective healthcare for members*



# Medical schemes protect members by balancing affordability, access and long-term sustainability



## PRINCIPLES UNDERPINNING MEDICAL SCHEMES



**SOCIAL  
SOLIDARITY**

**NOT  
FOR PROFIT**

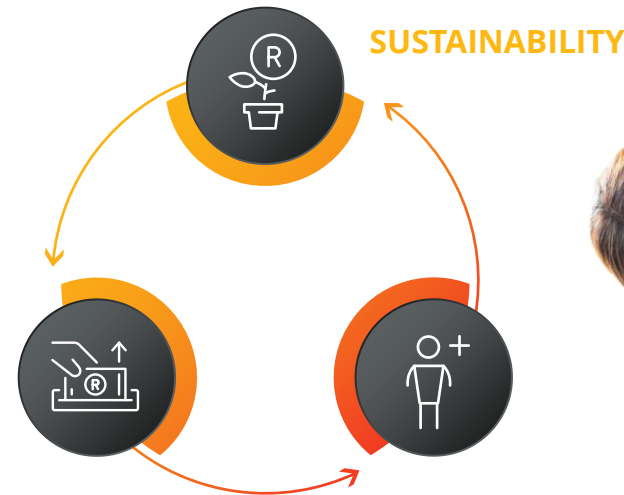
**STRONG  
GOVERNANCE**



Medical schemes provide **financial protection for medical expenses** in exchange for member contributions

Member participation through the **annual general meetings**, trustee elections, surveys and other feedback mechanisms is **crucial to scheme governance**

## BALANCING MEMBER NEEDS AND LONG-TERM SUSTAINABILITY



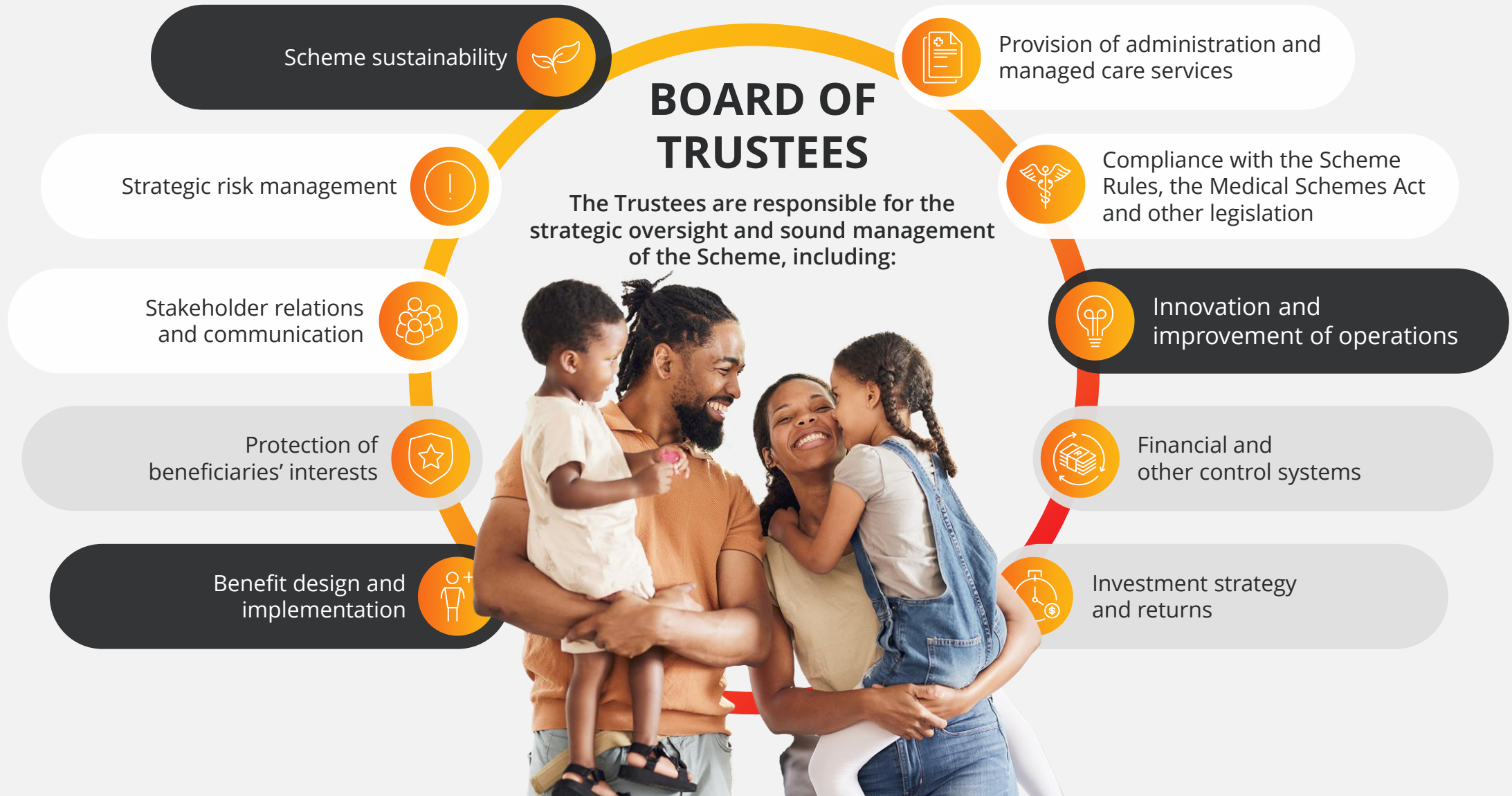
**AFFORDABILITY**

**ENHANCING  
BENEFITS**

Medical schemes must continually balance **affordability, sustainability and benefits**  
**Contributions must match expected claims** for the forthcoming year and meet regulated solvency requirements



# Trustees at the core of strong Scheme governance



# Trustees navigate a complex health environment



## Regulatory compliance and engagement

Active engagement across the Prescribed Minimum Benefit review, Low Cost Benefit Options, and Designated Service Provider guidelines. Direct participation in industry consultation.

PMB review ongoing

LCBO process

## National Health Insurance and legal engagement

Trustees oversee constructive engagement and active involvement in the Health Funders Association's constitutional legal challenge to the National Health Insurance Act.

HFA legal challenge active

Proclamation paused

## Safeguarding member funds from fraud, waste, abuse and errors

Fiduciary duty to protect pooled member funds, while ensuring fair, transparent and equitable processes.

Collaborative industry processes

R576m recovered in 2025

## Financial stewardship — solvency, investment and sustainability

Investment strategy, solvency management and contribution-setting. ESG integrated into investment mandates. Excess reserves deployed to benefit members.

32.6% solvency ratio

Reserve management

## Benefit design, clinical governance and healthcare quality

Evidence-based funding decisions, benefit rule implementation, and care programme performance — overseen through the Clinical Governance and Risk Committees.

Clinical and Risk Committees

Evidence based funding

## Operational integrity and system oversight

Oversight of internal controls and response to operational issues. A 2025 Above Threshold Benefit claims system error was independently reviewed, fully remediated, and financially resolved.

Independent review completed

No member disadvantaged

# Ability to act on fraud, waste, abuse and errors is central to protecting members



## WHAT FRAUD LOOKS LIKE

### Orthotist Prosthetist



Investigation revealed multiple fitting and gait training – often in excess of 60 hours per day. For one member, **R3.47m** was claimed for 2,280 hours of consulting where typical costs range between R35,000 and R70,000.



### False Pathology and Radiology Claims



**R11m** in false claims submitted



**2 suspects** arrested  
2026 court date



**Membership** terminated

## RIGOROUS PROCESSES SAFEGUARD MEMBER FUNDS

**Plus monitoring and investigation activities deter fraud, waste and abuse resulting in a halo effect**

**R576mil**

2025 savings and recoveries

**R4bn**

estimated additional halo effect savings

**75%**

of cases investigated reported through **whistleblowers**

**R3,400**

savings per member per annum

**5.3%**





lower contributions in 2025 (incl. halo effect)



# NHI implementation paused as court processes unfold



## RIGOROUS LEGAL EVALUATION OF NHI

- May 2024**  

**President signs NHI Act into law**
- Feb 2026**  

**High Court Consent Order Pauses Implementation**  
 Department of Health agrees to pause implementation of NHI and parties agree to pause substantive legal proceedings while procedural matters are considered by the Constitutional Court.
- May 2026**  

**Western Cape Government & Board of Healthcare Funders challenge heard.**  
 Judgement reserved
- 
**'Certificate of Need' provision ruled unconstitutional**  
 Provision in National Health Act deemed unconstitutional by Constitutional Court

**R532bn – R941bn**

estimated funding required for NHI implementation

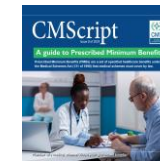
Various organisations involved in legal challenges



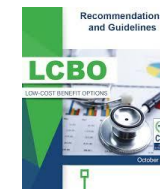
## ONGOING PROGRESS ON KEY REGULATION



**Health Market Inquiry (HMI) recommendations**



**Prescribed Minimum Benefits (PMB) review**



**Low Cost Benefit Options (LCBO) framework**



**Fraud, Waste, Abuse & Error framework**



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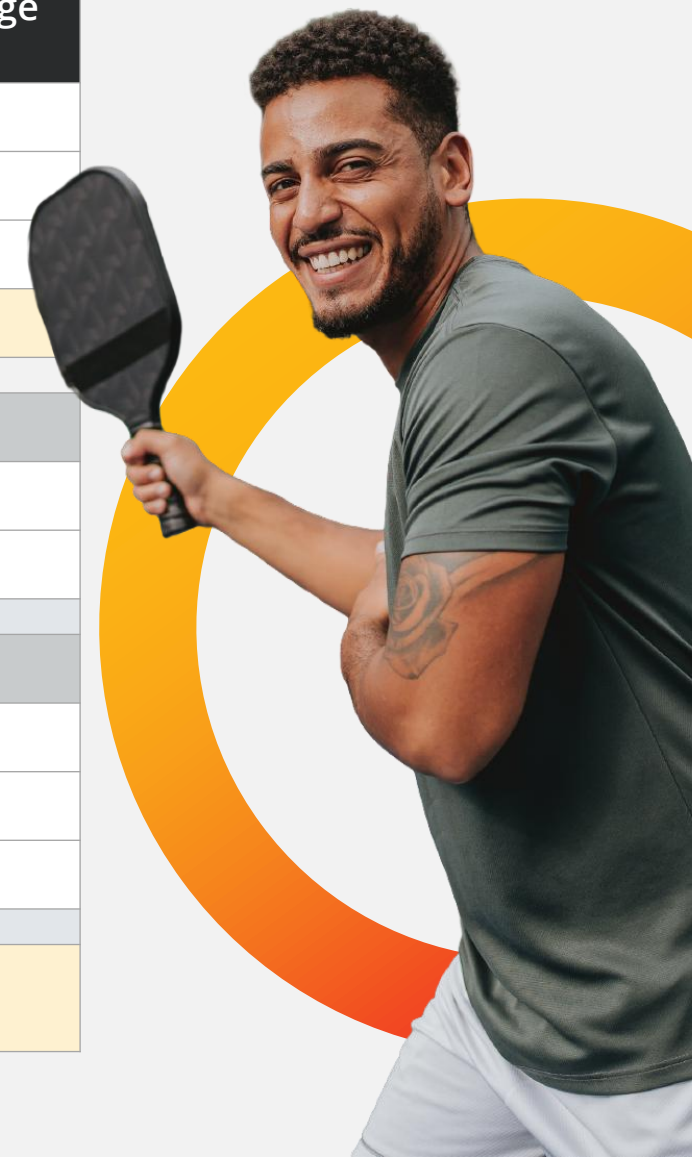


# 2025 DHMS financial highlights



## A sustainable operating performance and healthy investment returns

Measure	2024 (R '000)	2025 (R '000)	% change YoY
Insurance revenue (risk contribution income)	80,673,076	86,652,776	7%
Insurance service expense	(81,096,469)	(86,227,264)	6%
Net income from risk transfer arrangements/ reinsurance	73,068	139,950	92%
<b>INSURANCE SERVICE RESULT</b>	<b>(350,325)</b>	<b>565,462</b>	<b>261%</b>
<b>Other income</b>	<b>4,577,188</b>	<b>8,018,326</b>	<b>75%</b>
Investment income including net gains on financial assets	4,541,696	7,974,895	76%
Other	35,492	43,431	22%
<b>Other expenditure</b>	<b>(1,330,415)</b>	<b>(1,409,388)</b>	<b>6%</b>
Other administration fees	(686,987)	(719,412)	5%
Other operating expenses	(210,659)	(233,934)	11%
Other	(432,769)	(456,042)	5%
<b>NET SURPLUS BEFORE AMOUNTS ATTRIBUTABLE TO FUTURE MEMBERS</b>	<b>2,896,448</b>	<b>7,174,400</b>	<b>148%</b>



# 2025 DHMS financial highlights



## Financial strength provides certainty for members

Financial position at 31 December 2025

Measure	2024 (R '000)	2025 (R '000)
Non-current assets	26,888,100	31,964,284
Current assets	12,867,797	15,062,567
<b>TOTAL ASSETS</b>	<b>39,755,897</b>	<b>47,026,851</b>
Non-current liabilities	30,489,597	36,606,417
Liability to members for future benefits*	30,485,863	36,604,016
Lease liability	3,734	2,401
Current liabilities	9,266,300	10,420,434
Insurance contract liability	8 034 282	8 167 592
Liability to members for future benefits*	1 100 831	2 157 078
Other	131,187	95,764
<b>TOTAL LIABILITIES</b>	<b>39,755,897</b>	<b>47,026,851</b>

Extracted from DHMS' audited annual financial statements

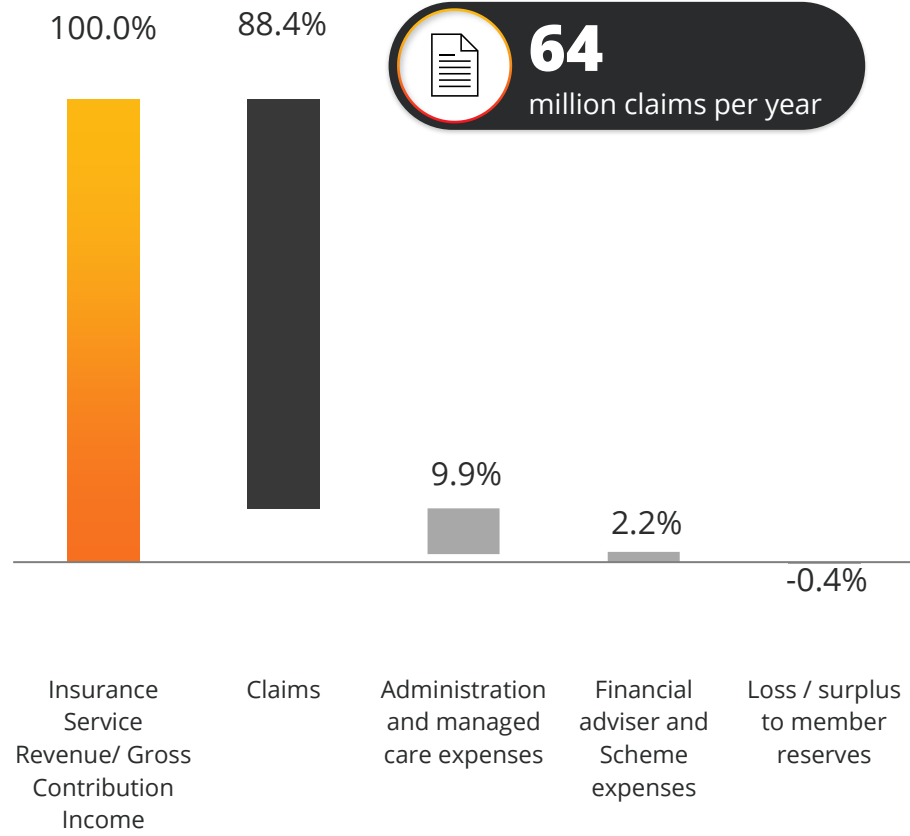
\*'Liability to members for future benefits' former known as 'Insurance liability to future members' and prior to that 'Accumulated member funds' under IFRS4



# Member contributions are directed to healthcare expenses

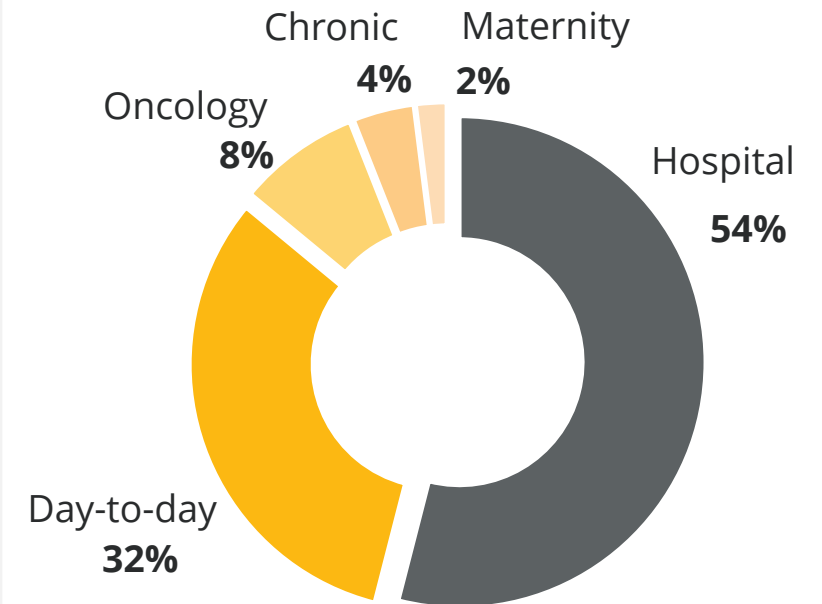


## MAJORITY OF CONTRIBUTION INCOME USED TO COVER CLAIMS IN 2025



## CATEGORY BREAKDOWN OF CLAIMS PAID IN 2025

**R89.4bn**  
DHMS claims expenditure in 2025

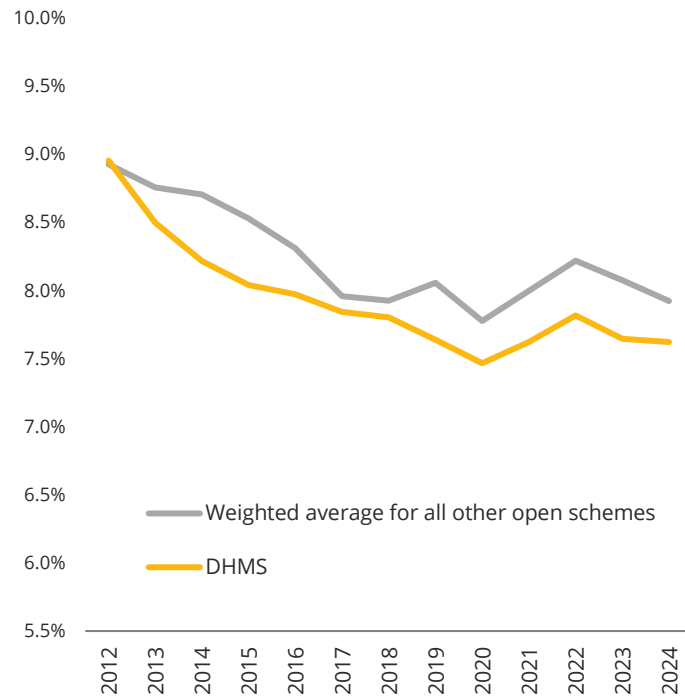


Source: DHMS 2025 Integrated Report, Internal Data

# Efficient administration helps maximise member value

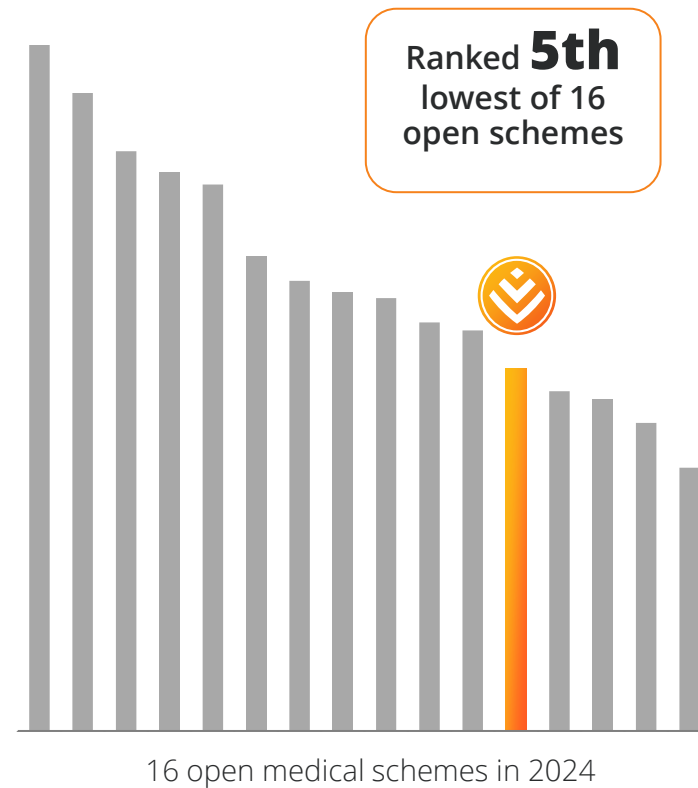


## ADMINISTRATION EXPENDITURE AMONG THE LOWEST IN THE INDUSTRY



Administration expenses as a % of Gross Contribution Income

## ADMINISTRATION EXPENDITURE AMONG THE LOWEST IN THE INDUSTRY



DHMS MEMBERS RECEIVE OUTSTANDING VALUE FROM DISCOVERY HEALTH

**For every R1 spent**

on managed care and administration fees in 2025, Scheme members derive

**R2.10**

**in value**

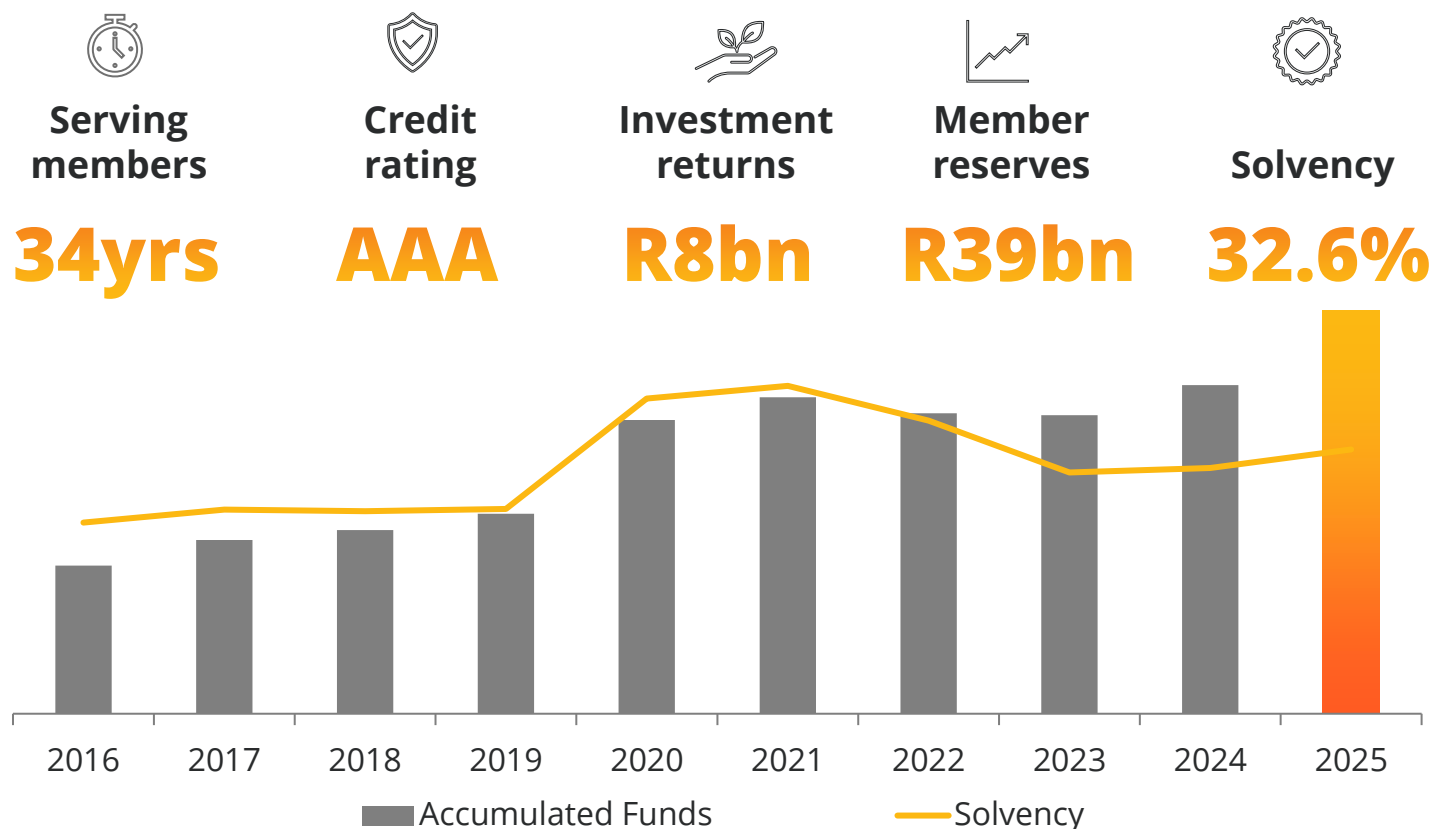


Verification by NMG

# Financial strength supports long-term sustainability and provides security and peace of mind to our members



2025 SAW CONTINUED GROWTH IN MEMBER RESERVES SUPPORTED BY STRONG INVESTMENT RETURNS AND STABLE SOLVENCY



SCHEME STRENGTH HAS DIRECTLY TRANSLATED INTO MEMBER VALUE

Months deferred contributions

**18**

In improved affordability

**R8.5bn**

between 2021 and 2025



**R340m**

Personal Health Fund value unlocked in 2025

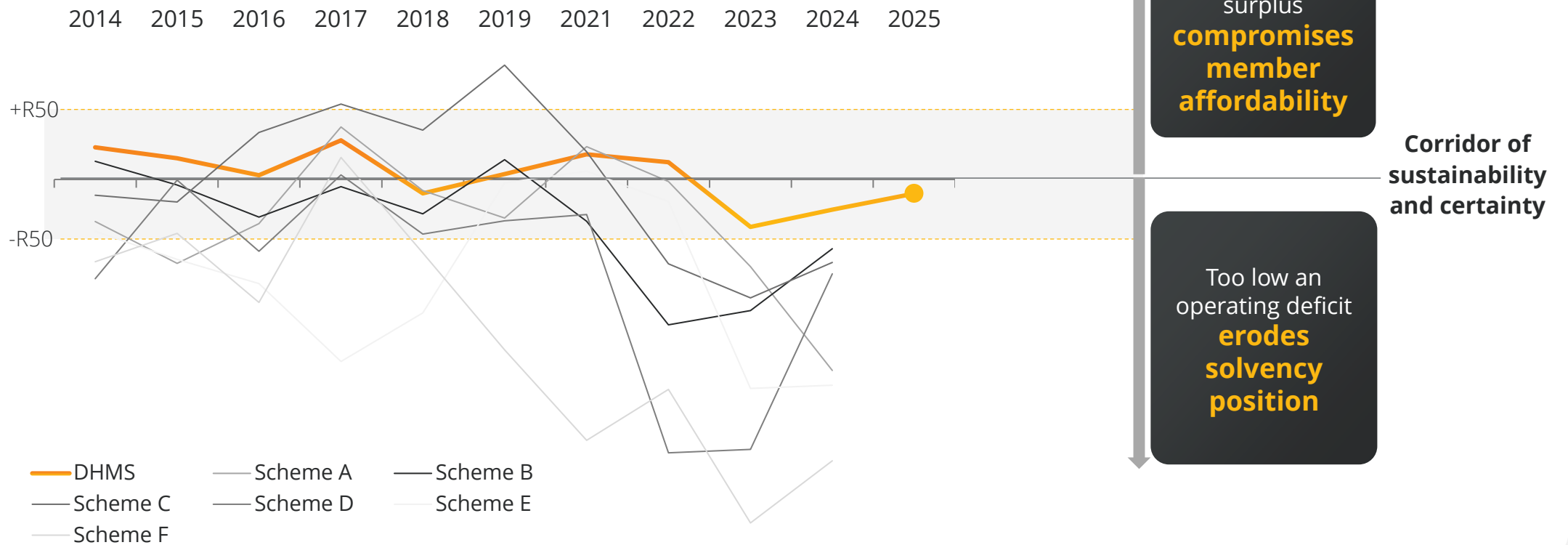
# Sustainable, predictable performance provides members with certainty



## DHMS LONG-TERM OPERATING STABILITY IS AN INDUSTRY OUTLIER

### Net healthcare result per average beneficiary per month

Top 7 open schemes – 2014 to 2025



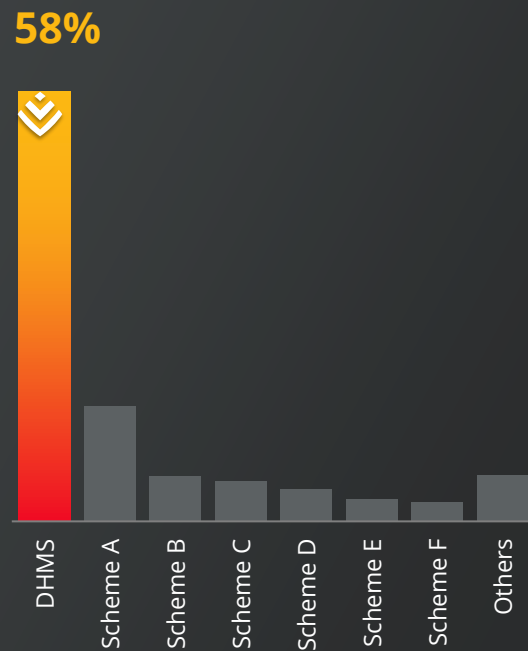
# Consistently delivering market-leading affordability to members



## MEMBERS CONTINUE TO CHOOSE DHMS

**6 OUT OF 10**

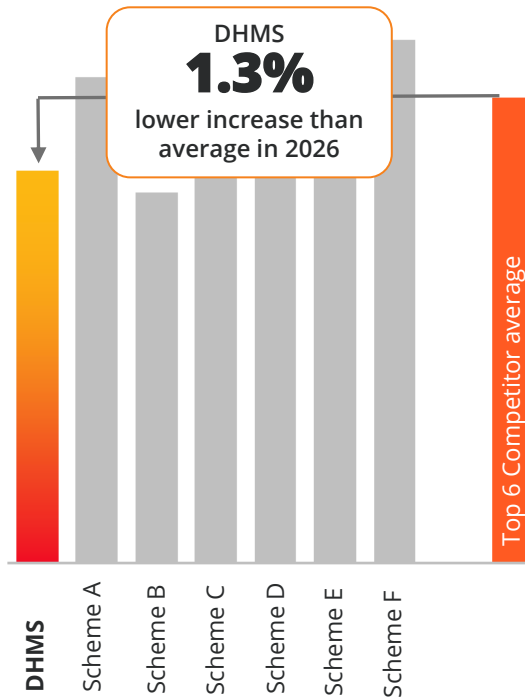
Open scheme members choose DHMS



Respective market share of the top open schemes

## MARKET-LEADING CONTRIBUTION INCREASES

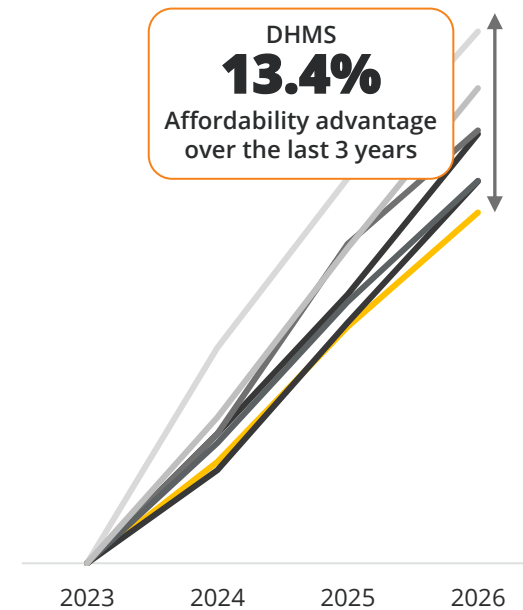
3-months contribution deferral reduces the effective annual increase to 5.4%



Average contribution increase for 2026 top 6 open schemes

## SUSTAINED AFFORDABILITY OVER TIME

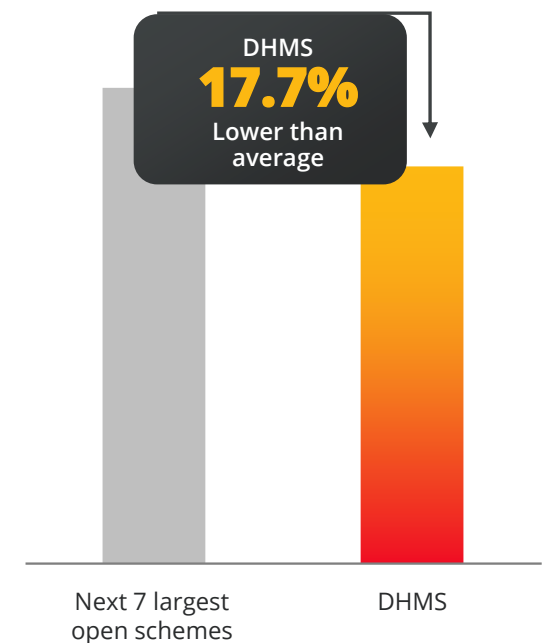
The benefits of market-leading contribution management compound over time



Cumulative impact of contribution increases relative to top 6 open schemes

## AFFORDABLE, INNOVATIVE PLAN DESIGN

Lower average principal member contributions than market average on benefit-adjusted basis



Average principal member contributions (from 1 April 2026)

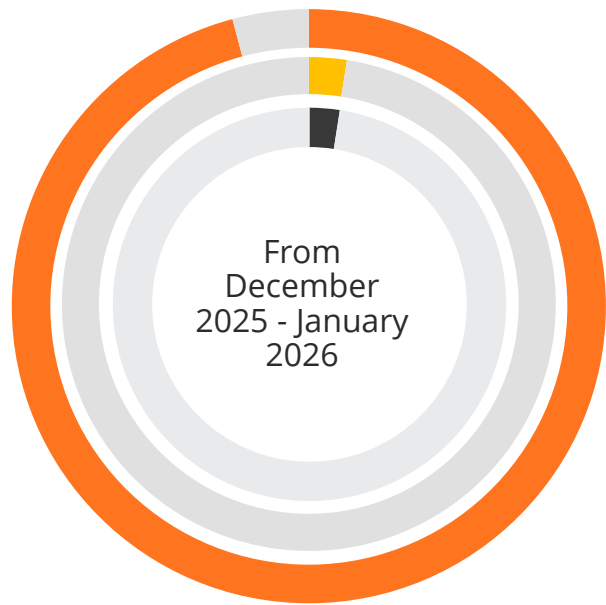
Source: CMS Industry Report for 2024/2025

Source: DHMS data  
\*DHMS weighted average contribution increase without deferral is 7.2%

# Membership growth that reinforces Scheme sustainability for the long-term



## STABLE MEMBERSHIP BASE

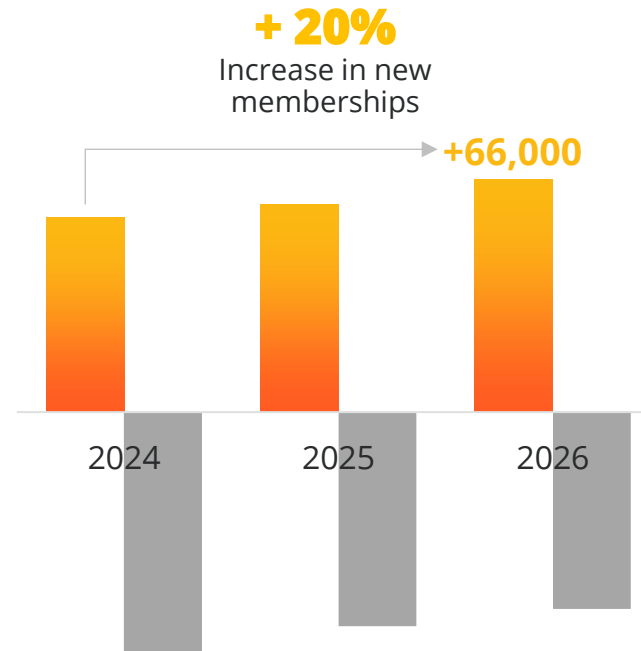


**95.86%**  
Plans did not change

**2.47%**  
Plans were upgraded

**1.67%**  
Plans were downgraded

## ACCELERATING GROWTH IN 2026 REFLECTING DEMAND FOR COVER



In 2025, DHMS principal membership grew by +9,000, returning to the long-term growth trend.

## QUALITY OF GROWTH REINFORCES SUSTAINABILITY

### Young and healthy lives joining

#### Average age



New joiners are **10 years** younger than existing beneficiaries

#### Chronic ratio



New joiners have a **22 percentage point** lower chronic ratio than existing beneficiaries

### Growth on sustainably priced options

**98.6%**  
Joining surplus generating plans

**+55,674**  
New members on growing plans



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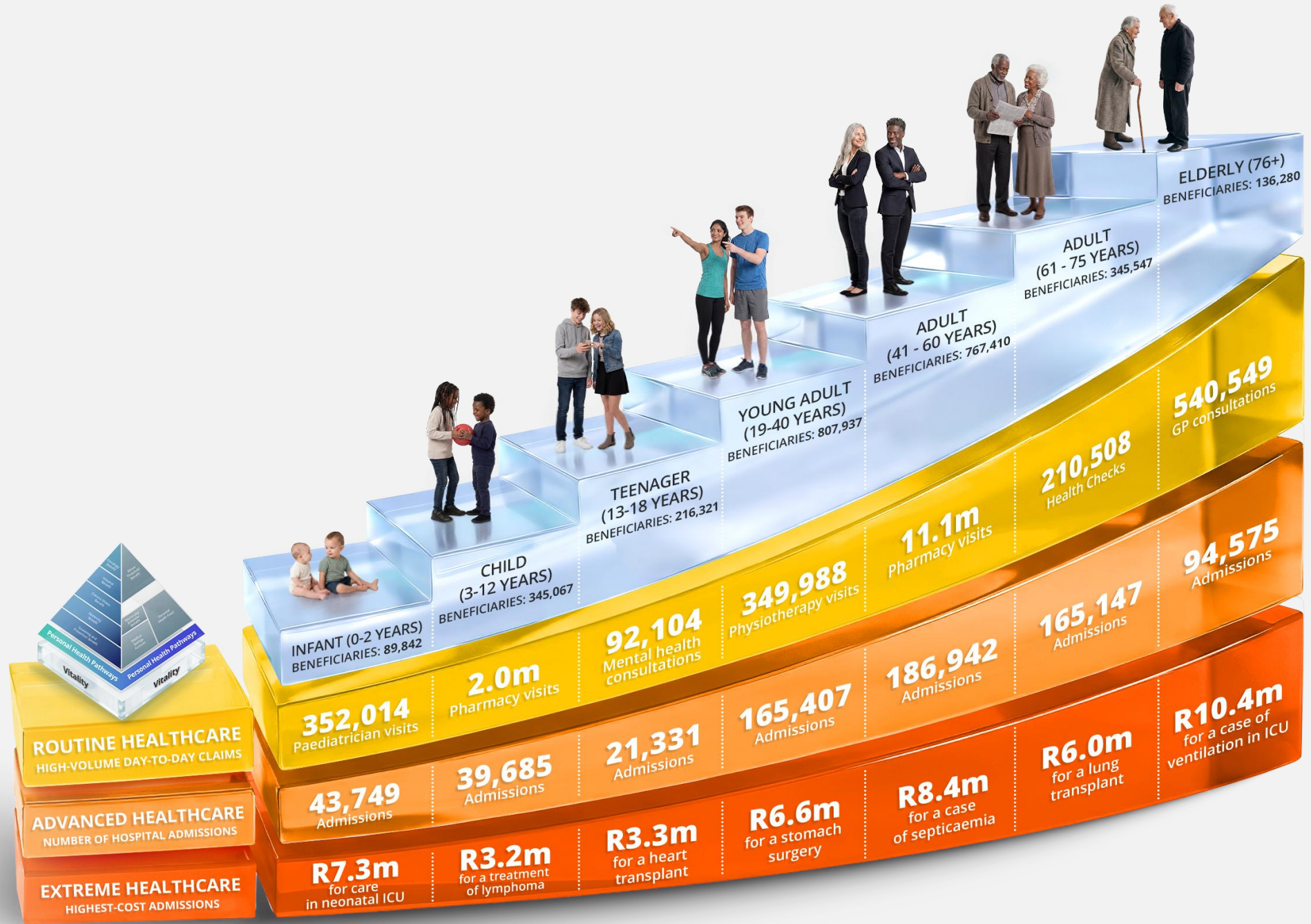
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# PROTECTION FOR MEMBERS AT EVERY LIFE STAGE



# More members are engaging in preventative care, creating opportunities for earlier intervention



## MEET GAIL

Personal Health Pathways recommended a cervical cancer screening to Gail (48) a mom to 3 sons between 5 and 20 years old.

An active HPV infection was picked up and Gail was able to treat the infection before the condition became more serious.



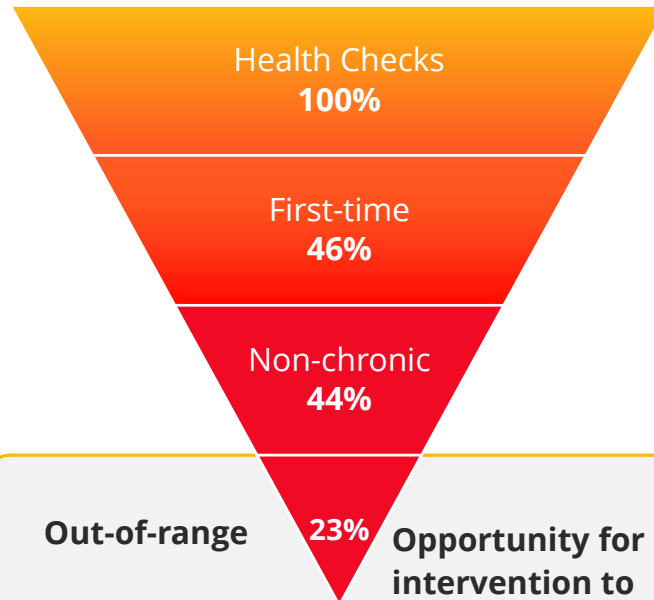
*"To my surprise, the screening results showed that I had an active human papillomavirus (HPV) infection"*

**ROUTINE HEALTHCARE**

## NEARLY 1 IN 4 HEALTH CHECKS IDENTIFY OUT-OF-RANGE RESULTS

**36%**

Increase in health check rates with PHP-enrolled being **3X** more likely to complete a check

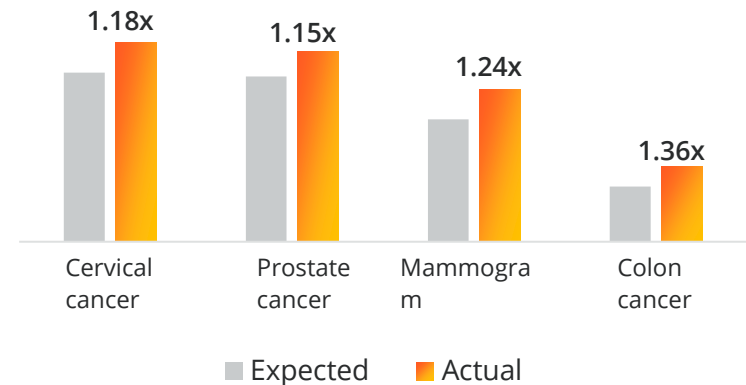


**ADVANCED HEALTHCARE**

## EARLY CANCER DETECTION CHANGES DISEASE TRAJECTORY

**20%**

Increase in cancer screening rates with PHP-enrolled members being **2X** more likely to screen



**67%**

**Relative reduction in mortality risk given regular screening**

**EXTREME HEALTHCARE**

# Over one million members are living with a chronic condition



Our care programmes unlock holistic benefits, provide integrated support and drive better health outcomes

### MEET NICKY

Nicky was a diabetic for years until a near-fatal COVID ICU battle. After that, Nicky took her health far more seriously and today she is healthier, stronger and 53kg lighter - and her diabetes is in remission.

*"If I hadn't been a DHMS member throughout my health journey, I wouldn't be here now. I am extremely fortunate."*



Personalised, in-person support team



Condition-specific benefits



Expert-led health monitoring



Proactive alerts for timely care



Convenient home-based care



**CARDIO CARE**  
248k enrolments

↓ **12%**

Lower admission rates for enrolled lives



**DIABETES CARE**  
86k enrolments

↓ **8%**

Lower admission rates for enrolled lives



**MENTAL HEALTH CARE**  
32k enrolments

↓ **3%**

Lower admission rates for enrolled lives



**HIV CARE**  
10k enrolments

↓ **12%**

Lower admission rates for enrolled lives



**ONCOLOGY CARE**  
108k enrolments

**+7yrs**

Increase in life expectancy over the past decade

Source: Discovery Health Medical Scheme data  
Risk-adjusted admission rates

ROUTINE HEALTHCARE

ADVANCED HEALTHCARE

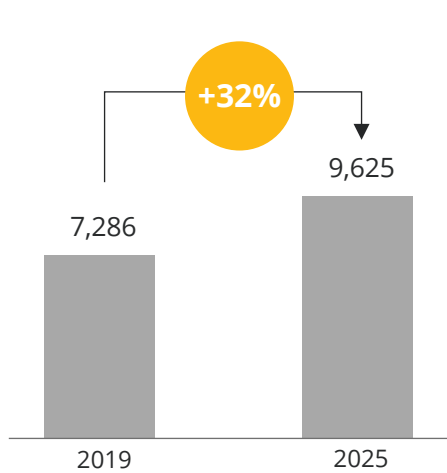
EXTREME HEALTHCARE

# Scheme providing life-changing care to members



## JOINT REPLACEMENTS

Members claiming for joint replacements



**34%**

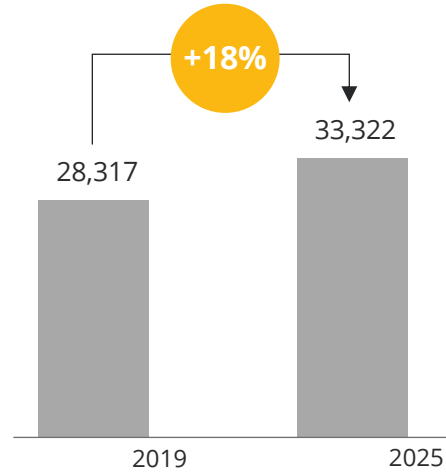
Reduction in readmission rates

**R180,600**

Average admission cost

## CATARACT SURGERY

Members claiming for cataract surgeries



**56%**

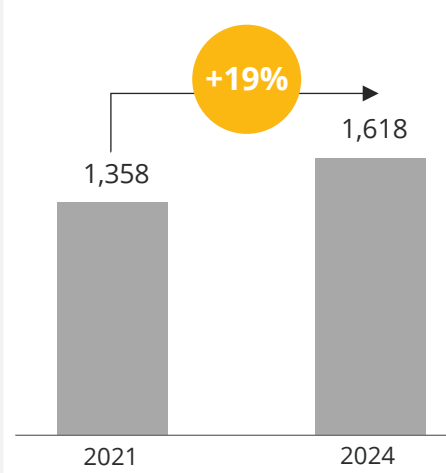
Likelihood of cataract surgery by age 80

**R36,000**

Average admission cost

## FERTILITY TREATMENT

Members claiming for fertility treatment



**69%**

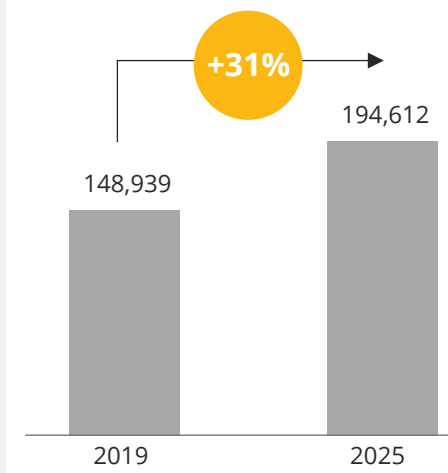
Birth rate following treatment

**R48,000**

Average cost per IVF\* cycle

## ONCOLOGY TREATMENT

Average annual cost for oncology claimants on treatment



**93%**

Of oncology treatment costs funded

**R486,000**

Average annual cost per Oncology Innovation Benefit claimant

## MEET AHANA

At just 19 months old, Ahana was diagnosed with stage 4 high-risk neuroblastoma – a rare childhood cancer. Ahana’s case was complex and coordinated support from several teams together with specialised chemotherapy was needed. Against all odds, Ahana is now thriving.



*“We couldn’t have done this alone,” says Avanya (Ahana’s mom).*

Source: Discovery Health Medical Scheme data  
Joint replacement readmission rates for hip and knee replacements over 2019 – 2024  
\*IVF - In Vitro Fertilisation, cost data for 2024

ROUTINE HEALTHCARE

ADVANCED HEALTHCARE

EXTREME HEALTHCARE

# Real protection for members and their families when they need it most



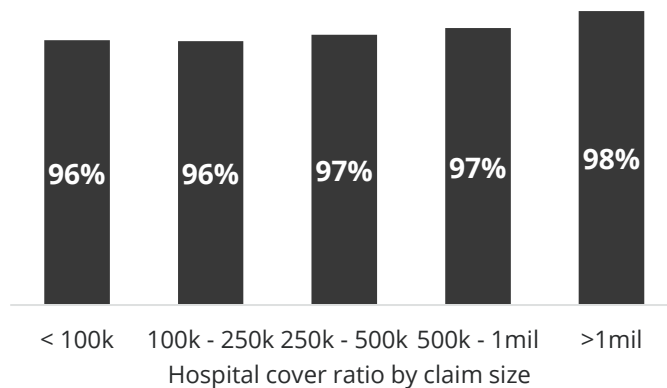
## MARKET-LEADING HOSPITAL COVER

**R54bn**

Paid claims for hospital admissions in 2025

**96.1%**

Members receive higher-than-industry coverage along with additional protection for higher-cost treatments



ROUTINE HEALTHCARE

## MEET PETER

A simple toe-nail infection spread beyond his foot, complicated by his Type 1 Diabetes. 69-year-old Peter faced months in hospital, multiple operations and, eventually, a below-knee amputation. Now, he's learning how to walk again.



*"I'm so grateful the Scheme covered my surgeries and prosthesis, and that someone like Silindile could be there to support me."*

*"I walk about 30 minutes daily and plan to drive again soon. I'll be 70 in 2026 and still moving - better than some of the youngsters at the gym!"*

ADVANCED HEALTHCARE

## 5 OF THE HIGHEST HOSPITAL CLAIMS PAID IN LAST 12 MONTHS

- R12.7m** Age 57  
Long term use of ventilator
- R8.4m** Age 48  
Infections in the blood
- R7.3m** Age 0  
Surgical procedures in newborn babies
- R6.6m** Age 39  
Stomach surgery
- R6.0m** Age 20  
Trauma

**366**

Years worth of contributions to fund the highest claim

**2,562**

Individuals claimed over R1,000,000

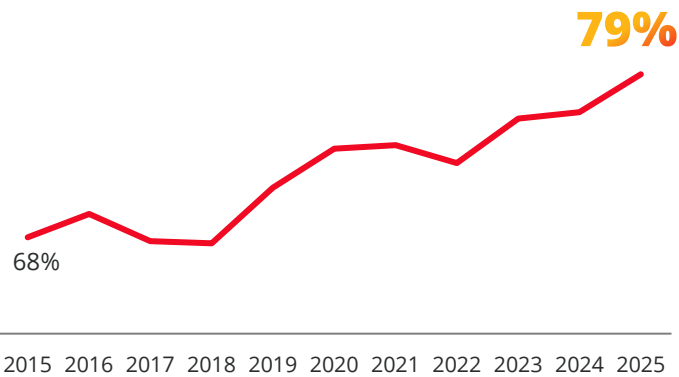
EXTREME HEALTHCARE

# Making high-quality healthcare more accessible and convenient



## AFFORDABLE ACCESS THROUGH TRUSTED PROVIDER NETWORKS

**79% of new joiners chose network plans**



### 3 Hospital Networks:

KeyCare  
(118 hospitals)

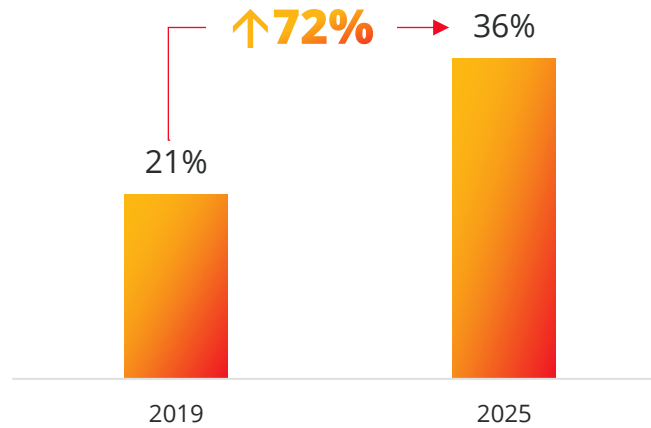
Delta  
(52 hospitals)

Smart  
(59 hospitals)

ROUTINE HEALTHCARE

## INCREASING ACCESS TO CONVENIENT CARE

**Increasing use of day clinics for eligible procedures**



**>145**

Facilities in the day-surgery network

ADVANCED HEALTHCARE

## UNRELENTING FOCUS ON QUALITY OF CARE

**Improved readmission experience across key procedures**



Acute myocardial infarction

↓ **15%**



Total hip and knee replacement

↓ **10%**



Pneumonia

↓ **7%**



**>5%**

Improvement in patient satisfaction during hospital admissions

EXTREME HEALTHCARE



# AGENDA

## > 01

### Care for our members' health and wellness

*Healthcare is evolving rapidly, shaped by changing disease patterns, rising demand and opportunities to improve health outcomes*

## > 02

### Delivering equitable access

*Sound governance, responsible stewardship and active engagement ensures continued access to quality care*

## > 03

### Affordable healthcare

*Disciplined financial management, operational efficiency and sustainable growth support long-term member affordability*

## > 04

### Quality, value-based care

*Delivering the highest quality of care and support across each member's healthcare journey*

## > 05

### Now and into the future

*Investing in innovation to deliver precise, personal and effective healthcare for members*



# DHMS continues to innovate to create even greater value for members

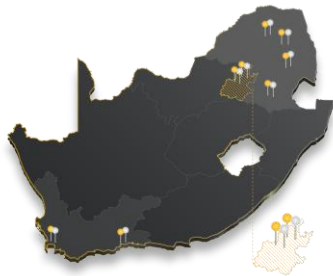


## EXPANDING ACCESS TO HIGH-QUALITY HEALTHCARE

Introduction of the Smart Saver plan range in 2026



Expanding access with new regions for Keycare Start



## COMMITMENT TO AFFORDABILITY

Annual contribution increase for 2026 of

**7.2%**

Contribution deferral delivered financial relief to members

**R1.5 billion**

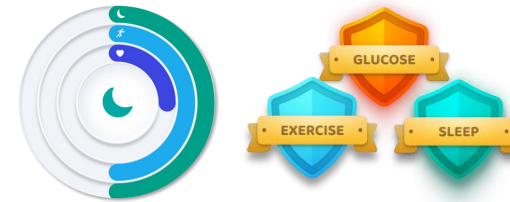
**R1,100** per average membership

## HOLISTIC IMPROVEMENT IN MEMBER HEALTH

Precision and personalisation with Personal Health Pathways



Ongoing enhancement supporting holistic member health



## GREATER DAY-TO-DAY FUNDING

Enriching day-to-day benefits across all plans through enhancements to the Personal Health Fund



# Expanding access to affordable, high-quality healthcare

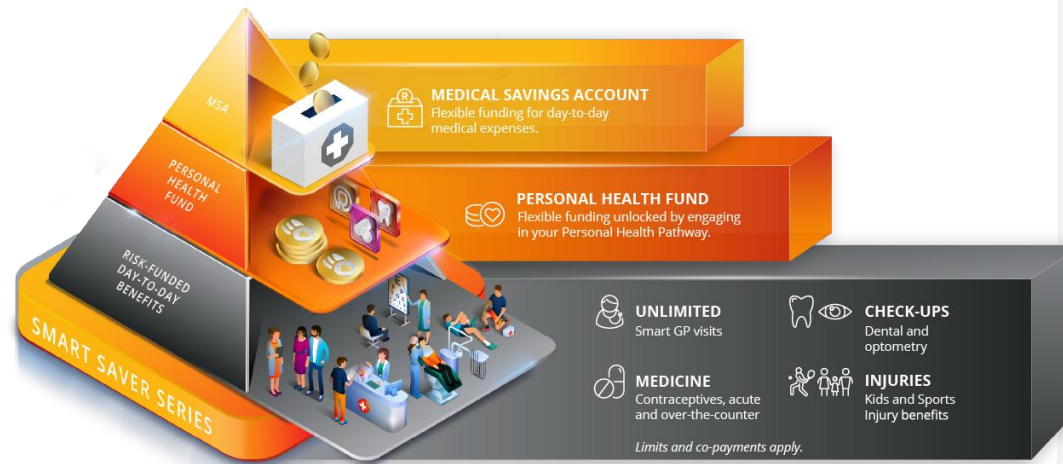


## The Smart Saver series: providing unmatched value to young families

Market-leading hospital cover & Next generation day-to-day benefits



Up to **200%**  
Smart network  
in-hospital cover



## Ongoing benefit enhancements

### Supporting management of sleep disorders



Diagnostic consultation



Sleep health coaching



Cognitive behavioural therapy for insomnia (CBT-i)



Continuous Positive Airway Pressure (CPAP)\*

### Nurture at home



Increased support for parents of a new-born who spent 7+ days in the neonatal ICU



Expanding regional access on KeyCare Start

### 3 new delivery systems from 2026



Potchefstroom



Welkom

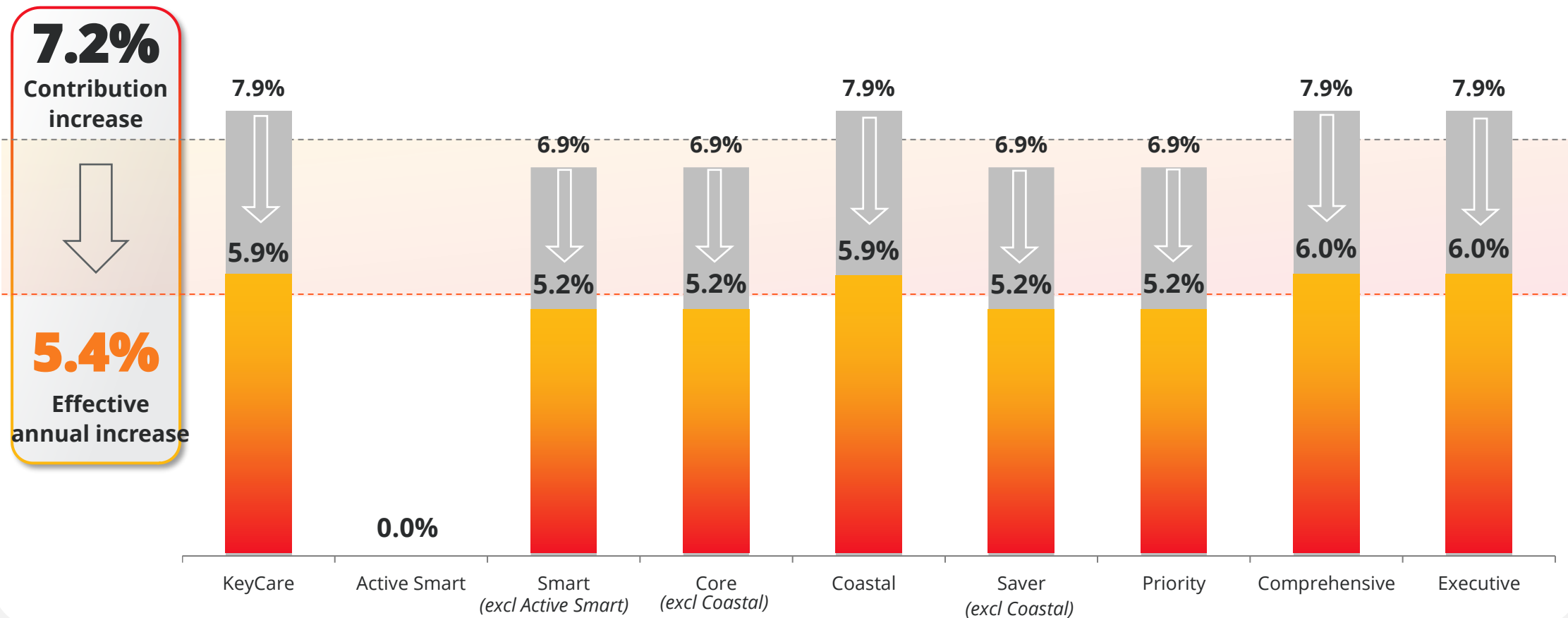


Kimberley

**24** systems across South Africa

# Enabling significant member savings through 3-month contribution increase deferral in 2026

**R1.5bn** reserves returned to members through responsible contribution increase relief



# Enhancing member wellbeing holistically through continued innovation



New in 2026

## HOLISTIC APPROACH TO IMPROVING MEMBERS HEALTH

### Health actions

Encouraging clinical, screening and lifestyle actions

### Physical activity

Encouraging physical activity and exercise actions

### Sleep patterns

Encouraging healthy sleeping behaviours

## DRIVING ENGAGEMENT

**1.2 mil**

Health Actions completed

**7 mil**

Physical activity Actions completed

**> 6.2k**

Members activating sleep per day

## BUILDING HABITS



Better Health Challenge

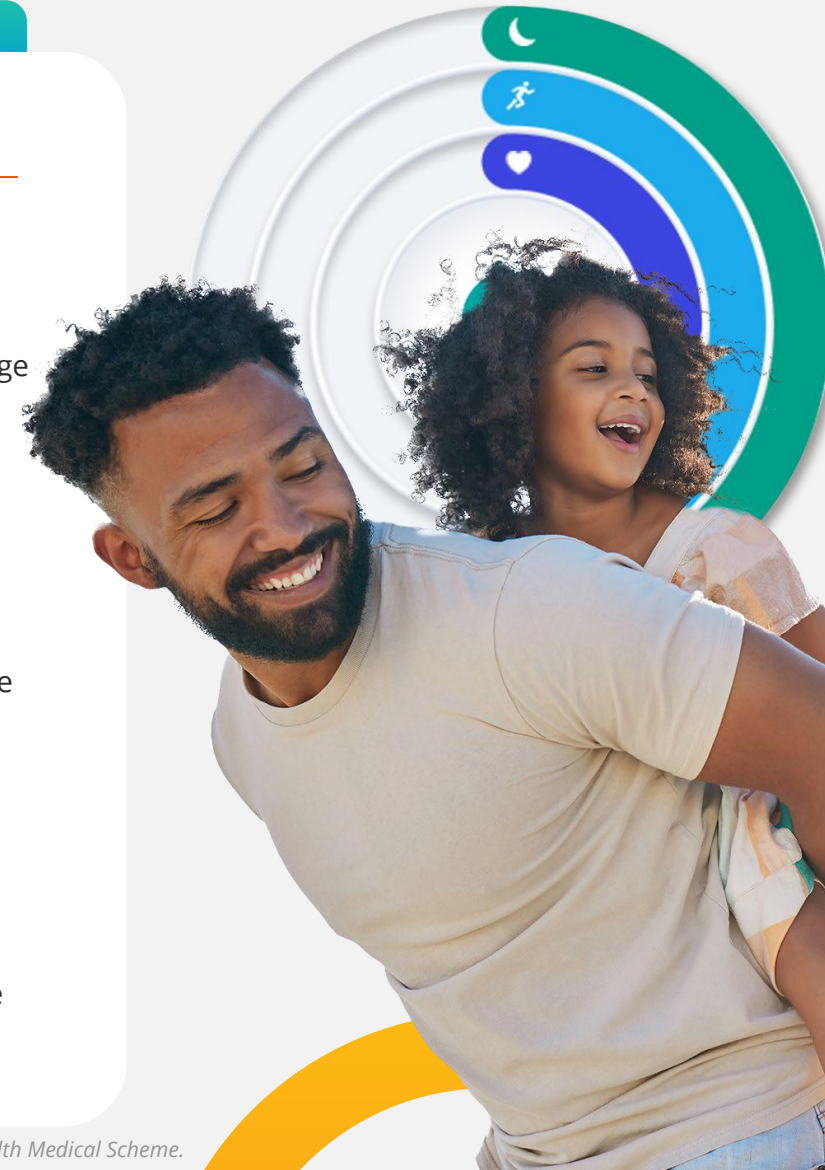


Move More Challenge



Sleep Well Challenge

New in 2026

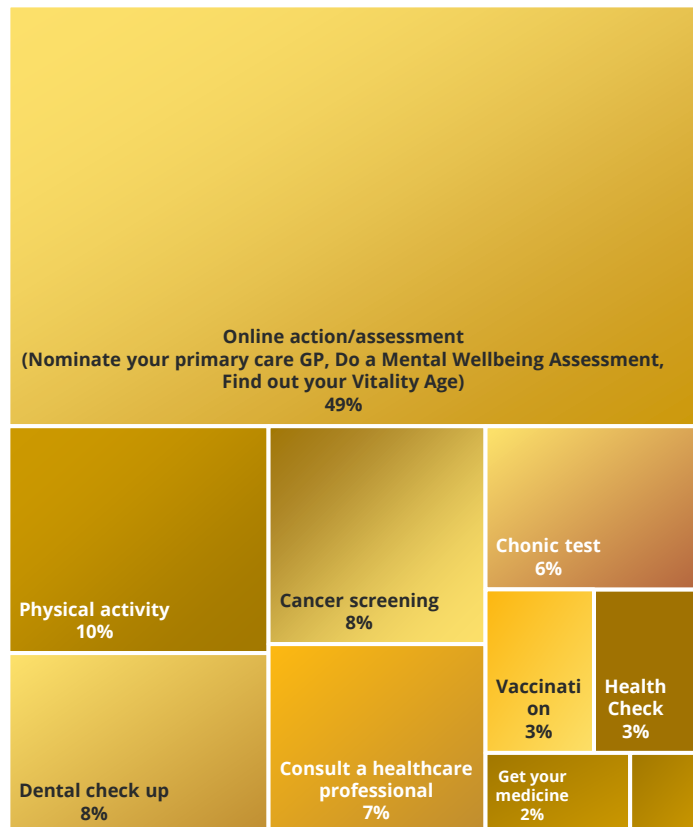


# DHMS members have access to greater day-to-day benefits through the Personal Health Fund in 2026



## MEMBERS CAN EARN FUNDS THROUGH EASY ACTIONS

### Personal Health Fund earned by action type



## PERSONAL HEALTH FUND EXTENDS EVERYDAY HEALTH COVER

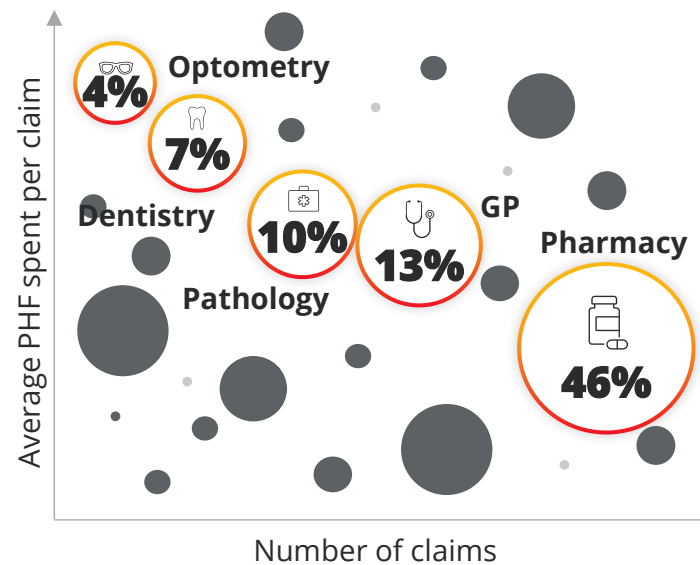
>**R1bn**

in Personal Health Fund earned

>**300k**

Principal members who have earned PHF

### Extending day-to-day benefits



○ Proportion of total Personal Health Fund utilised at Apr 2026

## IN 2026 MEMBERS CAN EARN EVEN MORE FUNDS

>**R9bn**

Personal Health Fund value still available to members in 2026

### Personal Health Fund Challenges



Up to **\*R12,000** additional PHF value per adult for engaging in challenges.

### Once-off PHF boost



Additional boost of up to **R1,000** per adult member for completing 3 simple actions



# CARING FOR OUR MEMBERS



Care for our members health and wellness



**Robust risk protection** over 2.7m beneficiaries



Sustainable **operating performance**



Safeguarding the ability to pay claims



**AAA** credit rating



**R39bn** reserves



**32.6%** solvency



Affordable value for members



**Lowest** effective contribution increase for 2026

**17.7%**



**Lower contributions** than market average\*



Quality, value-based care



**R89bn** paid across **64m** claims in 2025



**Improved outcomes** for members enrolled on **tailored care programmes**



Now and into the future



Unlocking value through **innovative** plan design



Holistic, **personalised** healthcare



Continued enhancement of the **Personal Health Fund**



\*Lower average principal member contributions than market average on benefit-adjusted basis



THANK YOU

**CHARLOTTE MBEWU**  
**PRINCIPAL OFFICER**

25 JUNE 2026

