

NHI fees could see mass exodus of doctors – expert

38

Citizen 26 June 2018

About 3 000 doctors will refuse to take part in the NHI and will seek legal action should they be forced to work at fixed rates, the expert adds.

Capped doctors' fees to be imposed by the national health insurance (NHI) legislation could see a mass exodus of doctors from the system, an industry expert has warned.

This after the South African Private Practitioner's Forum announced over the weekend its members would opt out of the NHI, threatening legal action should they be forced to work at fixed rates.

Dr Nicholas Burger, healthcare consulting analyst at Frost & Sullivan, warned that this and the existing dearth of healthcare practitioners in the country were a looming threat to public healthcare and the NHI.

Burger warned that while it was not clear how the NHI would affect employment rates in the healthcare sector, there were fears that it could result in an exodus of doctors who were not willing to comply with new capped fees, which would result in them not being accredited by the NHI.

“It is currently understood that patients will go to NHI-accredited doctors and the NHI fund will pay those doctors [similar to the way private medical aids currently remunerate doctors]. Approximately 3 000 doctors who are members of the SA Private Practitioners' Forum will refuse to take part in the NHI and will seek legal action should they be forced to work at fixed rates,” he said.

Adding to this risk was the fact that South Africa already had a shortage of healthcare practitioners.

According to the World Health Organisation, there were less than one physician per 1 000 members of the population in South Africa and other sub-Saharan countries.

“The NHI will need to work proactively towards retaining talent and building an accomplished workforce to address the needs of a growing population and a subsequent rise in disease burden and incidence,” suggested Burger. “Performance-linked incentives may offer one method with which to grow the current underpowered public healthcare workforce.”

Last week, the much-anticipated announcement of changes to the Medical Schemes Act by Health Minister Aaron Motsoaledi brought the NHI a step closer to being implemented. It was met with mixed reactions from the industry.

It was, however, supported by the Board of Healthcare Funders of Southern Africa, which represents 45 medical aid schemes and administrators, and manages care organisations in South Africa.

Burger predicted that the industry would recover from an initial slump over time, as some members would likely opt to forgo private healthcare.

“High-income earners may still opt to maintain their private health insurance [over and above contributing towards national health insurance] depending on their healthcare requirements,” he said.

He added that although major private entities such as Discovery Health and the Board of Healthcare Funders of Southern Africa showed initial signs of support for the NHI, there were certain barriers that would need to be breached.

“Government will need to consult with the private sector and negotiate the release of key data sets, including member demographics,” said Burger.

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