

HMI-prompted ethical rules redrafting underway - Medical Brief 26

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After agreeing with the Health Market Inquiry (HMI) findings to the extent that certain of its rulings – namely Rule 7 – Fees and Commission, Rule 8 and 8A – Partnership and Juristic Persons as well as sharing of the rooms, Rule 18 – Professional appointments and Rule 23A – Financial interests in hospitals – may have to be reviewed, the Health Professions Council of SA (HPCSA), through Registrar/CEO Dr Raymond Billa, has confirmed that a redrafting process is now well underway.

“We are to draft revised ethical rules in relation to those impugned rules as well as review and draft amendments to any other ethical rules and annexures that require revision so as to address all the concerns raised in the report of the HMI,” Billa told delegates to the Independent Practitioners Associations Federation (IPAF) mini-symposium held as a precursor to the KZNDHC Conference at the weekend in Durban.

Billa reminded his audience that in its preliminary report, the HPCSA ethical rules are cited as “the reason for lack of innovation in models of care and development of alternative reimbursement models” and that it was the view of the HMI that the HPCSA “is not sensitive to the benefits of competition in creating incentives for affordable and quality care.

In a comprehensive review of the existing rules and the alternative suggestions, Billa pointed out, for example, regarding Rule 8A on sharing rooms, the HMI suggested that the Rule be crafted in a manner that allows multi-disciplinary practices and partnerships and provide for clear guidelines of the grounds or factors that will lead to a ban or prohibition.

Of particular note was the HMI concerns with Fees and Commission sub-rules 7(4) and 7(5) which ostensibly “restrict a practitioner from sharing fees with another practitioner who has not taken a commensurate part in the service and prevents a practitioner from charging fees for services s/he has not personally rendered”.

These sub-rules, Billa acknowledged, had been interpreted to prohibit team-based care while the HMI was of the view that this dampens competition and inhibits innovation, in particular of new models of care.

Next steps in the redrafting process, the Council Registrar announced, will be a two-day workshop of the relevant committees at which presentations will be made leading up to adopting and approval of the amended ethical rules.

“Engagement with the Competition Commission will also take place in the interim,” he said