

Medical schemes offer expertise

MEDICAL aid schemes have offered their expertise as a "national asset" which can be used in refining the National Health Insurance policy. The Board of Healthcare Funders (BHF) has suggested a working relationship similar to that used to build the Gautrain, "where the private sector was contracted by government to fulfil a function of building the entire system, and the establishment of the Gautrain Management Agency, under the provincial government, manages the running of Gautrain". The BHF said this model would create flexibility and establish an appropriate platform to attract, retain, contract and remunerate the required skills and expertise adequately. It said that to have a well-functioning NHI system would certainly require such a model. The BHF has offered to help with designing and costing the NHI package, and has already developed an essential benefit package which it believes can be used as a blueprint for the NHI. The BHF has also offered to help with the development of healthcare tariffs and provider payment models. The BHF feels that the prevailing fee-for-service model is problematic, further exacerbated by the third party payment system. It said the private funding industry had extensive experience in contracting with private practice providers, and it could play an important facilitation role in rolling out alternative reimbursement models in preparation for NHI. The board has also offered to help with quality measurement, fraud management, communication and peer review. BHF spokeswoman Heidi Kruger said the board had already been in discussion with representatives from the Health Department about what role it could play. She said the director-general for health called a meeting at the end of October where she committed to setting up a forum which would look at the various aspects relating to NHI. Meanwhile the BHF said the current system was not sustainable and therefore changes had to be effected. It said it supported NHI as one of the interventions that could bring about that change for the sustainability of healthcare services in South Africa to the benefit of the consumer and healthcare providers. The board has also called for a review of the prescribed minimum benefits (PMBs) legislation, saying the current structure pushed up private health costs because there was no regulation of pricing for treating PMB conditions.

Dianne Hawker: The Sunday Independent, 15 January 2012