

NHI will cover everyone

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HEALTH Minister Aaron Motsoaledi has revealed some of the details regarding government's plan to introduce National Health Insurance (NHI). Under the NHI, medical schemes will only offer top-up cover for those services not covered by the NHI, the NHI will be funded through a central fund (partially funded from a payroll levy), medical brokers will be done away with (they currently receive R1.5 billion rand per year), and doctors will be able to access the central fund if they choose to participate in the NHI. These were some of the key announcements made by Motsoaledi at the release of the White Paper on National Health Insurance. National Health Insurance “seeks to transform the South African Healthcare system with emphasis on the promotion of health and the prevention of diseases. It also seeks to provide access to quality and affordable healthcare services for all South Africans based on their health needs irrespective of their socio-economic status”, according to the South African Government website.

The government green paper was released in August 2011, and it proposed that the NHI would be implemented within 14 years. Pilot districts were established in all nine provinces. The cost of implementing the NHI is projected to R225 billion by 2025. Possibilities of raising these funds, according to reports from 2012, include a pay roll levy for all employed South Africans, and increase in VAT, or an income tax surcharge. These possible sources of revenue were confirmed by Motsoaledi. SA's economy is under increasing pressure, and how the government proposes to fund the NHI is a topic of interest for all South Africans.

Another issue is how the public and private health sectors will function alongside one another, and what the future would be of medical schemes in South Africa. Motsoaledi that under the NHI, medical schemes will only offer top-up cover for those services not covered by the NHI. There are state hospitals that would need a serious upgrade and in 2013 President Zuma proposed that this would be undertaken through public-private partnerships. The minister has expressed ongoing concern about the fact that 80 percent of the medical practitioners in the country are servicing only 16 percent of the population - something the NHI is set to address. One of the ways of achieving this would be requiring doctors to show a certificate of need before being allowed to practise in certain areas. There is still no certainty with regards to the implementation of this. Concerns raised by commentators on the NHI include financial constraints of already overburdened taxpayers, the possible exodus of medical staff from the private sector to other countries, the poor condition of many state facilities, the lack of properly trained managers and the lack of trained medical staff willing to work in rural areas.

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