

The NHI is not moving fast enough

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IT IS THE billion-rand question: what role will the private sector play in the National Health Insurance (NHI)? Delegates at the ANC policy conference this week are likely to seek answers to this and what's behind what they say is a slow move towards universal healthcare. Last week, the Health Department released its NHI White Paper. The document outlines how government will become the single buyer of health services for all South Africans from both public and private medical providers through a mandatory NHI scheme. The paper also heralds the introduction of high levels of government regulation, set to lower healthcare prices and slash - but not necessarily eliminate - medical aids. Ahead of the White Paper's release, trade union federation Cosatu's social development policy co-ordinator, Lebogang Mulaisi, warned the organisation and its members would be watching to see if government kept its promise to end South Africa's multi-payer system of healthcare under the universal healthcare, or the NHI. Earlier this year, Cosatu lambasted the Health Department for what it said were attempts to "water down" the NHI after the department's director-general Precious Matsoso allegedly made overtures to private medical aids to bring them into the NHI. Speaking at the release of the White Paper, Motsoaledi said those concerns were largely "based on hearsay".

Cosatu is busy drafting its own position on the NHI white paper, but the organisation is likely to welcome government's commitment to a single-payer system. But it is unclear what the trade union federation will say about the White Paper's position on medical aids, which may still have a place in the post-NHI era. Motsoaledi has publicly said that medical aids will have to disappear under the NHI, but he admitted last week that the debate is ongoing as to whether people will be allowed to have some form of medical insurance in addition to mandatory participation in the NHI. The White Paper itself seems to suggest a continued - albeit a far more limited role - for medical schemes saying: that with the implementation of the NHI, the role of medical schemes in the health system will change.

Once the NHI is fully implemented, medical schemes will offer complimentary cover to fill gaps in the service coverage offered by the NHI. What is clear is that government is looking to slash the number of medical aids that operate in the country, of which there are about 83. Those that survive will also offer a reduced number of products. With the NHI-mandated introduction of price regulation in the healthcare sector, medical aids post-NHI are also likely to see a reduction in profits. Both Mulaisi and Cosatu affiliate the Democratic Nursing Organisation of South Africa (Denosa) have confirmed that they will also be looking for answers about what they say is the government's slow rollout of NHI. Mulaisi said Cosatu will be demanding details about the NHI's progress, including the outcome of recently completed pilot programmes in 10 districts nationwide. Denosa spokesperson, Sibongiseni Delihlazo, said the union welcomed the NHI White Paper but remains concerned about the unequal distribution of health workers in rural and urban areas, and the slow pace of improvements to the health system ahead of a fully-realised NHI in 2025. He said that considering that we are on year six now, the slow rate of completed infrastructure upgrades to hospitals, clinics and community health centres is worrisome.

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