



NHI White Paper: Day 3

This is the third in a series of daily analysis pieces of the NHI White Paper that will be sent to SAPPF- and HealthMan Members. Different aspects of the NHI will be analysed on a daily basis, which will help to assist providers in understanding how the NHI initiative will impact the private provider and their practice, as well as the impact on their own access to healthcare. Some broader economic impacts will also be included on occasion.

Extract from the White Paper

NHI represents a substantial policy shift that will necessitate massive reorganisation of the current health care system, to address structural changes [sic, should read problems] that exist in both the public and private sectors.



Critical Analysis

Massive reorganisation is neither a guarantee of improvement nor an absolute requirement to improve the current situation. Implementation of

This process has never been revisited in an attempt to set acceptable prices that consider costs in the private sector.

current legislation will improve the system without a massive reorganisation.

PMB review which is legislated to happen every two years has not happened since 2010, adding to costs in the private sector.

The scrapping of the RPL in 2010 because of the failure of the minister to consider practice costs, has created a vacuum in pricing, which also adds to the costs.

Unpunished failure to comply with Public Finance Management Act means that suppliers of public sector goods and services are going unpaid for long periods, which eventually leads to a breakdown in service delivery to hospitals and clinics.

Appointment of incompetent managers in the public sector further adds to service delivery problems. The disastrous Frere Hospital in the Eastern Cape was turned around by appointing a competent manager.

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