

NHI White Paper: Day 26

This is the last 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. Ad Hoc Newsflashes on NHI will be sent going forward.

Extract from "NHI Implementation: Institutions, Bodies and Commissions that must be established"

Gazetted on 7 June 2017

4. Ministerial Advisory Committee on Health Care Benefits for NHI Terms of Reference (amongst others):

b) Develop Norms and standards for effective health care service delivery, including:

1. The Scope of care
2. The Care Setting - or most appropriate point of delivering care
3. Exclusions- determine under which circumstances certain services will be excluded
4. Waiting times
5. The Ministerial Advisory Committee on Health Care Benefits will ensure the core services provided are uniform across the district are provided with the requisite quality,

Critical Analysis

This is the clearest indication to date that certain services will be excluded from cover in the NHI, as well as the fact that waiting times are considered as part of the system.

There is the question as to whether there will be any penalties for excessive waiting times being imposed on patients and whether there will be any recourse on this for patients.

Presumably the Office of Health Standards compliance can affect penalties for excessive waiting times, which could include withdrawing the certification of compliance for the facility. The facility will then no longer be able to provide services to the NHI, leading to an increased load on other facilities.

Despite the increases in the Pilot Districts being higher than the provinces, health outcomes in the Pilot Districts are still below that of the Provinces, as measured by Maternal Mortality rates and Immunisation coverage.

Maternal Mortality is 130.5/100 000 in the pilot districts, compared to 119.1 in the provinces. Immunisation coverage is lower in the NHI Pilots at 85.6% of 1 year olds, compared to 89.2% of 1 year olds in provinces.

Despite higher spending, health outcomes are worse in the NHI Pilots.

Share your comments: info@nhisa.co.za

[Unsubscribe](#) • [Update Profile](#) • [View PDF](#) • [Pause Subscription](#) • [View Online](#)

This email was sent to maretha@healthman.co.za on 22-08-2017 by Health Management & Networking Services, Unit 16, Northcliff Office Park, 203 Beyers Naude Drive, Northcliff,, Gauteng, 2115

HealthMan Services is intended for opt-in communication only. If you feel this email is unsolicited please [report it](#) to us

Email Powered By HealthMan Services

