

NHI is doomed to fail, if pilot projects are anything to go by

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It should not be surprising that health minister Aaron Motsoaledi effectively has put the brakes on the National Health Insurance (NHI) projects.

He mentioned that the government should “go back to the drawing board” to decide what to prioritise in healthcare spending following the mid-term budget. The truth is it is a decision doomed to fail from the outset.

First, it cannot be implemented due to failure in the current health sector, which cannot deliver effective healthcare to the majority of South Africans.

Second, the minister cannot tell us what it will cost to implement the NHI and advises that it will take up to 15 years to effectively implement. The provinces cannot manage current budgets and have all declared they are underfinanced.

Third, the NHI pilot projects have failed abysmally. If a pilot project is unsuccessful there is no chance that it will be successful nationally.

Last, the NHI aims to put a cap on the number of private health insurance providers and medical aids. This creates a monopoly in the industry, price-fixing and collusion.

The DA’s Our Health Plan, on the other hand, will uplift the health sector and introduce a practical and sustainable healthcare system that is far more effective. It can be rolled out and put into effect within five to eight years, takes into account the needs of all South Africans, and where put into practice has proved itself. Our Health Plan will provide quality healthcare that is affordable and can be implemented using our current health budget.

Where Our Health Plan is implemented in the Western Cape, the province has showed that it can deliver better healthcare than in any other province. Mortality rates are lower — half of any other province — it has attracted the highest number of doctors and has the highest number of specialists per capita. Hospitals and clinics are better maintained and have far better resources.

Lindy Wilson

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