

Q&A: Government med scheme execs on NHI, medical aid & the future of healthcare

Nov 11 2018 **Lameez Omarjee, Fin24**

The Government Employees Medical Scheme (GEMS) is expanding its benefit offering for members, to [align with national policy](#) of universal access to healthcare, through the National Health Insurance (NHI) fund.

This week in Cape Town, GEMS Principle Officer Dr Guni Goolab and Chief Operations Officer Dr Stan Moloabi briefed media on the benefits offered for 2019. GEMS is a medical scheme for government employees and was registered on January 1, 2005.

Goolab and Moloabi shared their views on the future of healthcare in an interview with Fin24.

Fin24: Health Minister Dr Aaron Motsoaledi has highlighted inequality in the healthcare space, which has led to the introduction of NHI policy. As professionals from the medical schemes industry, why do you think good quality healthcare is so expensive?

Dr Goolab: Part of it is related to the outcomes of the health market inquiry. The outcomes emphasise that there are challenges in both the medical scheme environment and the public sector.

The public sector is suffering from shortage of staff, skills and equipment - so it poses and inequality challenge because of the lack of resources available.

In the private sector, we find over-servicing and inappropriate levels of care.

What are your views on the abolishment of co-payments proposed in the Medical Schemes Amendment Bill?

Goolab: Not all co-payments will be removed. There are certain instances where you would want to apply co-payments to encourage appropriate behavior [by patients]. A good example is generic medicines – if there is a generic that is affordable or less expensive to the original and if the registered medicines authority has confirmed the quality is the same as the original, then the scheme would pay up to the value of the generic. In that case, the member would be exposed to the co-payment if they opted for the original.

How is GEMS staying competitive, especially as competitors have been making use of technological innovative in their offerings to members?

Moloabi: We have a new division which is part of our current five-year strategy. The research and development unit is responsible for product development.

We can be innovative, but if innovation does not solve problems then it is just innovative for the sake of it. We have introduced an app in the past two years. As for innovation – we are doing it to address things we need to solve within GEMS.

Where do you see healthcare in the future?

Moloabi: People always ask what NHI is about. It is a vehicle to try and address or introduce universal healthcare.

The broad definition of universal healthcare is where we have health system in which everyone, irrespective of their ability to pay but rather based on their need, can then access healthcare appropriate for their needs.

It is idealistic - but that is where we need to move to – to try and ensure that anyone who needs healthcare must have it.

We have a history where healthcare is treated like a commodity. The hope is that we evolve; it's not an overnight solution.

The separation of private and public healthcare is something we must overcome over the long term.

You are both medical doctors – do you think you are making a difference in the medical schemes industry, especially as it often gets a bad rap?

Goolab: If we want to have a different future as a country and a society, then trying to maintain the status quo is a bad idea.

We are saying everybody needs to change – we all need to come together as South Africans from all of our different sectors and put our capabilities to make a difference in the country.

We consider ourselves as patriots and we want to make a difference in health which is a big issue for our country. We want to make a difference in education, which is a big issue, and we want to address the land issue in our country. If we do those three big things - and they are big things - then we can be a winning nation, and meet the hope and aspiration of Madiba.

We think we can make a difference.

Moloabi: Can we make a difference? Yes, we are here where we feel contributing towards a better understanding of how we can improve access to health and how to do that is by providing a product people can access.

There needs to be an understanding of what it (medical schemes) is.

When you pay a medical aid contribution – you are not contributing money you are going to use. You are contributing towards a benefit.

Ultimately when we pay towards an NHI fund – we will all contribute towards to ensure healthcare services can be bought for everybody.