

## **Private doctors suggest alternative to NHI**

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INSTEAD of pressing ahead with the complex and expensive reforms needed for National Health Insurance (NHI), the government could provide universal healthcare by getting the private sector to play a greater role, according to the South African Private Practitioners' Forum (SAPPF). It said the private healthcare sector is an asset worth protecting. It has previously voiced criticism of the government's White Paper on the NHI, which was released for comment on December 11 2015. The comment period closed on May 31. In its submission on the policy, the SAPPF has proposed an alternative scenario, which it said would enable the government to increase the funds available for public healthcare without raising taxes. The forum suggests that the government make it compulsory for all wage earners to belong to medical schemes, with a smaller basket of benefits for people earning low incomes. At the same time, employers would be required to provide additional gap cover. It argued that this would not only lessen the load on the public sector but also reduce medical scheme premiums, because a larger risk pool would see healthy members cross-subsidising the sick and reducing underwriting costs by 20 percent. Instead of passing these savings onto members, the money would be pooled using a medical scheme levy into a new fund, called the Private Health Access Fund (PHAF), which would provide private primary healthcare services to the poor and indigent by contracting with private sector providers. The SAPPF said at the latest medical scheme contribution figures, a 20 percent saving on contributions would lead to an annual income of R26.6-billion for the PHAF. This figure was about half government spending on district health services in 2012-13, it said. The forum also suggests scrapping the Compensation Fund and the Road Accident Fund, and directing the money currently flowing into their coffers into the Private Health Access Fund instead. The access fund would outsource its administration, inviting medical scheme administrators to bid for the contract. The SAPPF said the PHAF will not cost the government anything and will reduce the patient burden on the public sector by 50 percent. It estimates the reforms it proposes would bring an extra 9.3-million people into the medical schemes market, which currently covers about 8.8-million people, or 16 percent of the population.

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