



SADA

THE SOUTH AFRICAN
DENTAL ASSOCIATION

PRESS RELEASE

Purpose:

Sharing SADA stance regarding NHI

Statement:

The implementation of the NHI Bill in SA: Troubling as many key questions remain unanswered

On Thursday the 21st of June 2018, South African Health Minister, the honourable Dr Aaron Motsoaledi, presented the long-awaited National Health Insurance (NHI) Bill and the Medical Schemes Amendment Bill. Referred to as ‘twin bills’, they are aimed at enabling the implementation of South Africa’s answer to universal healthcare and have now been gazetted for public comment. There are currently four NHI projects which will be implemented, costing Treasury R4.1 billion.

Dr Pusetso Moipolai, President of the South African Dental Association (SADA), says, “The stark inequalities in access to quality healthcare services is a major concern for all South Africans. For decades, the question has been: how can all relevant parties work together to find a solution to this national challenge?”

SADA is the leading professional membership body for dentistry and the voice of oral healthcare in South Africa.

Dr Moipolai highlights that the concept behind the NHI Bill is a righteous one, a noble cause which all South Africans should get behind. “After all, who in their right mind would oppose the ideal of a universal healthcare system that seeks to provide quality healthcare to all citizens?”

“However, the healthcare industries impacted by the recent announcement have been left with a number of unanswered questions, ranging from whether the strategy will even work in application, to what the future of their workforce holds if the concerns of professionals on the ground are not addressed.”

“The amendments will have massive repercussions for our members in the oral healthcare field.”

“While many recommendations within the Bills could undoubtedly benefit the public, the uncertainty surrounding details of the proposals makes it difficult for the country’s oral healthcare professionals to fully engage with and support the government’s proposal for universal healthcare access,” she explains.

Dr Motsoaledi has admitted in recent interviews that he knows the South African public healthcare system is not working properly. He has also stated that a private healthcare system is not the answer either, due to exorbitant costs and the overburdened nature of the medical aid industry. While Dr Moipolai agrees with these points, she questions whether the NHI, as it is envisaged at this time, is the answer.”

SADA CEO, KC Makhubele adds that, due to the lack of information and detail within these Bills, the industry’s highly skilled professionals have been left to assume the worst in many cases.

He says, “Not only do we not know who will be financing the scheme, how it will be ensured that money is not wasted, how it will work, when it will be put into action or which healthcare services will be covered, we are also in the dark when it comes to the process of NHI certification, what the relationship will be between the relevant public and private sector stakeholders and what ‘fair’ levels of remuneration will actually look like for our members.”

Makhubele further questions whether initial criticisms of the NHI by opposition parties, medical aid providers and other healthcare professionals have been explored.

“Dr Motsoaledi has noted that the NHI will not be like Eskom or SAA – both of which have faced numerous financial challenges and maladministration allegations over the years. The Minister has further added that government is going to use the British National Health Service (NHS) as a guide. We have many members who have first-hand experience in the NHS and the feedback is that not only is the system riddled with challenges, it is failing.”

“Judging from the experiences of other nations like the United Kingdom, and Germany - which has worked on getting their system running smoothly for 120 years - the challenges accompanying such a system are clearly ongoing - and the success rate is poor. This, along with the many problems already facing the national public healthcare sector, means it is highly debatable whether the implementation of universal healthcare is realistic within the 14 years envisaged in the NHI. Instead of jumping head first into an NHI system which doesn’t have the best track record internationally, shouldn’t we look into fixing the existing issues facing our sector?” asks Makhubele.

He emphasises that Dr Motsoaledi’s response to this has been that government cannot wait for the public healthcare system to reform before introducing free, universal healthcare because it will take too long. “With this in mind, one wonders if government actually believe they can fix the public healthcare system.”

“Without being too negative,” says Makhubele, “Our government would do well to take into consideration that, until they can demonstrate that they can spend our tax money wisely and efficiently, remunerate practitioners fairly and remove unnecessary bureaucracy, the NHI, as noble of an idea as it is, will just be seen as a new platform for corruption.”

“Without clarity on suggestions like capping the fees of our country’s medical workforce, we also run the risk of driving even more of our professionals to look for opportunities overseas, leaving our already strained health sector even worse off,” he says.

Dr Yvette Solomons, Chairperson of the SADA Board, states that if one uses the 2010 prices on healthcare to calculate the cost of the NHI, the total is about R256 billion per year. “If we are optimistic about the ANC’s new leadership and assume a growth rate of 3.5% per annum, by 2025, this will translate to a funding shortfall of R72 billion. And, we should all be aware by now that the NHI won’t be funded by the Department of Health, but rather by taxpayers,” she says, adding that funding is therefore one of the biggest hurdles that needs to be addressed.

Solomons adds that, in response to recent developments, SADA and other oral healthcare associations have formed a team to look into ways to assist in addressing the industry’s concerns relating to the NHI. “We welcome any attempt to improve access to quality healthcare in South Africa. We do, however, feel that it is essential for government and professionals to find common ground on this topic and make sure that no party ends up feeling undermined or exploited.”

“We hope that government stakeholders will take our suggestions seriously and that we can work together to arrive at a solution that works for all – the people of South Africa, the country’s leadership and our growing industries and skilled professionals,” she concludes.

#Ends

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About SADA:

The leading professional industry membership body for dentistry in Southern Africa, the South African Dental Association (SADA) represents over 80% of registered dentists in the country's private and public sectors. Membership is open to industry professionals from dental students to retired dentists.

The association is committed and engaged in processes relating to setting industry standards and formulating policies. Learn more about us at <http://www.sada.co.za>

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