Is NHI an affordable system?

The National Health Insurance (NHI)

What is the NHI and how will it change the system?

- The NHI is a Fund, paid by our taxes, from which the government will buy health care services for all of us who live in the country from health care providers in the public sector and private sector.
- This means when you feel unwell, you can go to your nearest GP or clinic of your choice that has a contract with NHI and not worry about the cost of care.

How can I qualify to be an accredited health care provider under the NHI?

- Every health care provider may be contracted by the NHI Fund. This will be initiated by the provider and once the provider meets the accreditation requirements they will be contracted. There will be no tenders for services.
- Every health care provider (public and private) must be certified by the Office of Health Standards Compliance.
- It will take some time for all health care providers to obtain certification, so the law makes provision for a transitional period of conditional accreditation by the Fund. The tools for health care provider compliance have been developed but NHI Fund accreditation and contracting requirements are still being developed.
- The health care provider must agree to, and comply with, the requirements of the NHI Fund to be accredited and contracted with the Fund. This includes connection to the Fund digital systems and reporting.
- A primary health care provider will be assigned a designated population that will be under their care and will be paid on a capitation basis. The details are being developed and will include a performance-based portion.

Is the function of accreditation by the NHI Fund substituting function of OHSC, HPCSA, SANC and other health professional regulatory bodies?

- No. The Office of Health Standards and Compliance (OHSC) primary responsibility is quality assurance. The role of the OHSC is to inspect and certify health establishments as compliant or non-compliant with prescribed norms and standards for a health establishment. All health facilities must be certified by the OHSC to be considered for accreditation by the NHI.
- The health professional regulatory bodies such as HPCSA and SANC are statutory bodies which regulate the registered professionals with the councils. All health professionals offering services in South Africa must be registered with the relevant professional bodies and comply with the rules and regulations and requirements of continuous professional development of the various bodies.
- The NHI will require both certification as part of the application for accreditation.

What are the requirements for accreditation with the NHI Fund?

- Accreditation with the NHI Fund will require that the provider must:
  1. Be registered with a recognised statutory health professional council.
  2. Be in possession of proof of certification by OHSC.
  3. Meet the needs of users and ensure service provider compliance with the Fund's prescribed specific performance criteria, accompanied by a budget impact analysis, including the:
     (a) Provision of the specified minimum required range of personal health services.
     (b) Allocation of the appropriate number and mix of health care professionals in accordance with guidelines.
     (c) Adherence to treatment protocols and guidelines, including prescribing medicines and procuring health products from the Formulary.
     (d) Adherence to health care referral pathways
     (e) Submission of information to the national health information system to ensure portability and continuity of health care services.
     (f) Adherence to the national pricing regimen for services delivered.

Will private health care providers be forced to contract with NHI?

Not at all. Contracting with NHI Fund gives the health care provider opportunity to offer health care services to a designated population (significantly more patients than currently). The provider will not have to worry about the patients' affordability as the Fund would have paid a capitation fee for the designated population. Patients who consult with providers who are not contracted with NHI will pay cash for the providers' services. Patients will only be able to use their medical schemes to pay for benefits not covered by the Fund with non-NHI contracted providers.

What will happen in the first few years of NHI implementation?

- The transitional arrangements for the NHI for the period 2023-2026 include:
  - Continuing with the health system strengthening initiatives including human resource planning.
  - Development of NHI legislation and amendments to other legislation.
  - Establishing institutions that must be the foundation for a fully functional Fund.
  - Purchasing of personal health care services for vulnerable groups such as children, women, people with disabilities and the elderly.
  - Establishment of the Fund as a Schedule 3A entity as contemplated.

How will corruption be prevented?

- The Fund will have a Board and various governance structures as required by the PFMA and King IV that will have the responsibility of ensuring that there are institutionalised systems, policies and procedures that proactively prevent, detect, investigate and correct incidents/acts of fraud and corruption.
- The Fund is required by law to establish and operate units that focus on fraud prevention, detection, investigation and correction of fraud and corruption.
- All employees of the NHI Fund will be responsible for preventing and detecting fraud in the execution of their assigned roles and responsibilities.
- The department, in collaboration with the Health Sector Anti-Corruption Forum (HSACF) and the Special Investigating Unit (SIU), is currently engaged in a process of risk identification, analysis and mitigation of all fraud and corruption risks that may affect the Fund.
- Control measures and mitigating strategies are currently being implemented in the design and development process of the NHI Fund.
- The public will have opportunity to anonymously report corrupt activities to law enforcement agencies and the HSACF which has been established by the President.
- The design of the NHI is far less complicated than the present myriad of departments and medical schemes. Everything that the fund does, all the contracts with providers and suppliers, and the common set of funded benefits, will be fully transparent. Since every person will be entitled to the same benefits and treated the same way, there is far less incentive for fraud and corruption.

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