

## **MEDIA RELEASE**

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## Amendments to Regulation 8 are good news for medical scheme members and the funding industry

27 July 2015: Opening the Board of Healthcare Funders' (BHF) 16<sup>th</sup> annual conference in Cape Town last night, BHF chairman, Dr Humphrey Zokufa, conveyed three important messages from Minister of Health, Aaron Motsoaled, who was unfortunately unable to attend. Universal healthcare coverage for South Africa is gaining momentum and will be discussed further at a United Nations meeting in September. "Our energies need to focus on making it work, not on fighting it," he said. Secondly, it's important to appreciate the 2009 Human Rights Commission report findings that the funding industry is stringently regulated while the provider industry is not adequately regulated. There have been many problems as a result of this anomaly and measures are being taken to normalise this. "Thirdly, in response to this report and reflecting our responsibility highlighted in the Constitution, we have amended Regulation 8, which has to date required schemes to pay prescribed minimum benefits in full at provider cost, regardless of that cost. Going forward, schemes will pay a maximum in terms of their individual rules, which will have the dual benefit of protecting the scheme, while sparing individual members from co-payments."

Both the MEC for the Western Cape, Dr Nomafrench Mbombo, and Lesotho's Minister for Health, Dr Molotsi Monyamane, added their voices to a call for unity and co-operation between all role-players to the ultimate benefit of patients, notably in the form of public/private partnerships. "Despite progress in both sectors, including improved life expectancy and better HIV care, there are many challenges, and healthcare needs to be seen in the broader context of the economic and political landscape," said Dr Mbombo. She proposed a three-pronged 'New Deal' comprising 'relief, recovery and regulation', requiring a growing of the economy that will see more people employed and thus able to afford medical aid. This will reduce the pressure on the public sector. "The challenge is to assist business to create this enabling environment, further to which we need new funding packages with a greater focus on preventive rather than curative care. We need to make wellness part of the bottom line."

Dr Monyamane acknowledged frankly that his country's post-independence progress with regard to healthcare was decimated by the advent of the HIV epidemic and that the country is still falling short of Millennium Development Goals. His plans to address this include partnering with communities, using village healthcare workers for advocacy and patient monitoring purposes. Among other things, his hope is that this will improve HIV and TB notifications and treatment success, reduce the child mortality rate and improve maternal health. "My aim is to get 90% of HIV-positive patients on treatment and ensure they remain adherent to that, to maximise immunisation rates and to ensure universal, equitable and quality healthcare at all levels, focusing on primary care interventions to strengthen the system. Accountability and partnerships are the solution."

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