

New minister promises NHI delivery

National Health Insurance (NHI) will happen, and the legislation governing its implementation and funding will go to Parliament soon, said the newly appointed health minister, Dr Zweli Mkhize.



Health Minister, Dr Zweli Mkhize

"Equally importantly, making progress towards universal health coverage requires transformation of the health system and reconfiguration of institutions for pooling of funds and purchasing of services to achieve social solidarity, efficiency, effectiveness and income and risk cross-subsidisation. In this regard we will be moving speedily to ensure that NHI Bill is tabled in Parliament," he said in a debate on the State of the Nation Address.

Yet, despite these promises of universal health coverage, the public health sector is plagued almost daily with reports of drug stock outs, staff shortages and lack of funds and security.



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Nelisiwe Msomi 19 Jun 2019



"The NHI Fund requires strong governance mechanisms and improved accountability for the use of allocated funds. These provisions have been included within the structural design of the NHI Fund and they are reflected within the NHI Bill," he added.

"The unresolved issues of unaffordable private healthcare and poor levels of service delivery in the public sector have impacted negatively on our national healthcare system resulting in our inability to ensure that all South Africans have access to quality healthcare based on need and not on their ability to pay," Mkhize said.



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South Africa spends almost 8.6% of the Gross Domestic Product (GDP) on health care, which is comparable to other middle-income countries with 4.1% of the GDP spent on the uninsured population.

Private medical schemes cover approximately 16% of the population, with most of the principal members of these schemes working in the formal sector.

An estimated 4.4% is spent on 16% of the population covered by medical schemes and who in the main access their health care services in a costly private sector.

In this regard, a smaller percentage of the population pay-out-of-pocket to use the private health sector.

Dr Mkhize said out-of-pocket services are rendered in both the public and private healthcare sectors - estimated at 0.6% of GDP or 8% of total health expenditure - which remains a burden to many poor households.

"This Government is determined to end these inequalities and bring quality healthcare to all as demonstrated by the establishment of the War Room in the Presidency. The president has been a champion of universal health coverage through the National Health Insurance," he said.

The implementation of the NHI is aimed at moving South Africa closer towards universal health coverage, wherein all citizens irrespective of their socio-economic status will be covered to receive quality healthcare services based on their health needs. Nonetheless, lack of staff, ARV and other drug stock

"It has to be supported by a quality health system. National Health Insurance is therefore a health financing system that is designed to pool funds and to use these pooled funds to actively purchase health services for the population based on the principles of equity and social solidarity. These pooled funds will provide for universal access to quality, affordable health care services for all South Africans irrespective of their socioeconomic status and I repeat, not on their ability to pay," he said.

Plan to deal with queues at healthcare facilities

Mkhize said, meanwhile, that government's analysis has shown that the majority of patients who visit public healthcare facilities do so only to collect chronic medication.

"We will reduce the long waiting times in the public healthcare sector by improving the efficiency of the system such that those patients that are stable chronic patients who only visit a facility to collect their medicines can collect these medications from a point close to their home.

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He also said that the stock visibility system has been implemented to monitor and address medicine availability.

“The system will be strengthened by ensuring that district pharmacists, district managers and provincial pharmaceutical services monitor the availability closely and respond urgently when there is the non-availability of medicines,” he said.

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