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# National Health Insurance (NHI) Bill

LEADING THE FIGHT AGAINST  
CANCER IN SOUTH AFRICA

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**90** YEAR ANNIVERSARY

CANCER ASSOCIATION OF SOUTH AFRICA (CANSA)

**Presentation on  
National Health Insurance Bill  
to the  
Parliamentary Portfolio Committee on Health**



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# Background to the Cancer Association of South Africa (CANSA)

- CANSA's purpose is to lead the fight against cancer in South Africa
- Our mission is to be the preferred non-profit organisation that enables research, educates the public and provides support through an integrated service to all people affected by cancer
- CANSA advocates for access to treatment and quality health care provision for all
- National organisation with footprints in all the provinces of South Africa

# Introductory notes from CANSA

- Concerns raised in our 2018 BILL submission are still relevant- will be inclusively referred to in this presentation
- We urge that the NHI Bill should be considered together with:
  - The Medical Schemes Amendment Bill
  - The Health Market Inquiry recommendations
  - Universal Health Coverage (UHC) as part of the Sustainable Development Goals (SDGs) to be achieved by 2030 as defined → by the World Health Organization (WHO) as a system → whereby all communities and individuals to access those quality care health services, without suffering financial hardship

# Introductory notes from CANSA

- Financial hardship a serious challenge for patients and families affected by cancer such as:
  - Treatment delays due to limited oncology resources in public sector
  - Poor maintenance of public sector oncology equipment → interruptions in treatment
  - Essential medicine stock-outs
  - Unaffordable medicine & treatment
- This defeats the objective of early detection and treatment that results in better outcomes, preventing patients' conditions from deteriorating

## Introductory notes from CANSA

**Concern:** Current dysfunctional health system - Essential health and related services needed by our population can only be provided within a functional health system and health systems strengthening for universal health strengthening is a key instrument for change

**Recommendation:** Access to health and treatment for all will require improvement of the quality of healthcare services for all  
→ NHI must ensure that the current crises within the Health Care System are resolved

## Message from 'The Elders'

The Elders are independent global leaders working together for peace and human rights- established by Nelson Mandela. They participated in a panel discussion, 2 September 2019 at Charlotte Maxeke Hospital, Johannesburg, hosted by Min. of Health

### Recommendations which CANSA supports:

- SA must tackle corruption in its health system. Many countries implemented NHI during periods of economic crisis
- Investing in health is investing in the economy – the outlay of a publicly-funded, single payer system will give return on the monies spent

# Message from 'The Elders'

## Recommendations cont:

- Cannot cover all sectors at once - a gradual approach to guarantee eventual success of NHI
- A systematic process, but this cannot happen from one year to the next. It must be built up, step by step
- Have to develop protocols (what is to be done and covered financially) for each type of disease diagnosis and must cost it before implementation



# Message from 'The Elders'

## Recommendations cont:

- Regarding minimum goods and services, the following:
  - All are entitled to equality
  - This needs to be defined. This will depend on the country's ability (what can be afforded). The size of economy will also assist to determine this
  - If expensive pathology treatment could not be afforded as part of NHI, then the private sector should offer this - but within prescribed protocols

# Message from 'The Elders'

## Recommendations cont.:

- Participation of stakeholders involved is so important to develop the implementation plan
- Prevention is also important to decrease the burden of disease - budget for primary health care must increase to assist in lessening the treatment impact of preventable disease
- Waiting lists ought not to be beyond 3 months maximum to ensure the success of NHI services

# Message from 'The Elders'

## Recommendations cont.:

- Chile started off with 3 pathologies (diseases) in year one; 5 in its 2<sup>nd</sup> year, etc. until 56 diseases were covered over a period of 20 years
- NHI needs to be implemented step by step. Individuals can claim against the Government if the Government does not fulfil its NHI promises

# Purpose and Application of the NHI Act

## FINANCING of NHI

- Act to be to established and maintain a National Health Insurance Fund
- **Concern:** The Bill does not provide detail on the funding of the NHI system except that this is a function of the National Treasury
- CANSA is of a view that if there is no clear funding strategy

# Purpose and Application of the NHI Act

**Concern:** NHI will have potential constraints for the foreseeable future if sources of funding are not well planned for due to:

- Weak macroeconomic conditions
- Other fiscal pressures on government
- Burden of diseases is increasing exponentially

## Recommendations:

- Clear plans with clear multiple funding streams needed to ensure sustainability of the services
- Management of the health funding must be strengthened across to all the different diseases, with no disease being discriminated against
- The clear pointing out of sources of funding and management thereof, will ensure the sustainability of funding for health care services

# Purpose and Application of the NHI Act

The Fund will be a singular purchaser and single payer of health care services

It will pool funds and be responsible for strategic purchasing of healthcare services and goods

## Concern:

We have seen from the centralised control over COVID-19 vaccines and centralised control of vaccination and vaccination sites, that central government found it difficult to effectively provide a COVID-19 vaccination programme.

How will the “Fund” be able to provide a complex sustainable health service?

# Purpose and Application of the NHI Act

The NHI Act Applies to all health establishment, excluding military health services and SSA

**Concern:** The Act needs to be very clear in assuring health-related NGO's like the Cancer Association of South Africa that its service offerings to the South African population will not be curtail

# Purpose and Application of the NHI Act

**Concern:** Current public health care system is not comprehensively meeting the needs of the users

## Challenges include:

- The lack of scarce skills
- Management and the burden of disease that is overwhelming

**Recommendation:** Need a clear recovery plan to overcome or manage the challenges, to be able to contribute to a sustainable NHI for the country



# Access to Health Care Services

**Recommendations:** For the Fund to attain its objectives, measures should be in place to:

- Proper re-engineering of health services
- Harmonize strategy and operations according to the National Development Plan
- Improve governance and accountability for a more responsive service system
- Facilitate collaboration of internal and external stakeholders to improve health outcomes
- Improve labour relations to be aligned to patient centeredness

# Access to Health Care Services

## Recommendations continue

- Population coverage → with no discrimination and no one to be left behind
- Registration as users: Efficiency of the personnel must be taken into consideration to prevent unnecessary waiting periods
- Rights of users upheld as per the provisions of the Patients' Rights Charter to ensure quality health care services free at the point of care
- Health care services coverage must ensure that the conditions of service provision for cancer patients is improved

# Access to Health Care Services

- Cost Coverage - Bill states that the user of the Fund is entitled to receive an accredited health care service provider or health establishment free at the point of care
- **Recommendation:** Process of certifying and accrediting and contracted service providers should be inclusive of civil society representation to ensure provision for equity and efficiency in funding by actively purchasing health care services, medicines, health goods and health related products from properly certified accredited service providers

# Access to Health Care Services

## The Rights of users

- **Recommendation:** The Bill should provide for purchasing complementary health service benefits that are not covered by the Fund through a voluntary medical insurance scheme registered in terms of the Medical Schemes Act or any other private health insurance scheme to ensure that cancer services are also provided for in this category so as to prevent challenges as previously experienced in the public health sector nationally

## Access to Health Care Services

**Concern:** Bill states where a provider is unable to provide a registered service, then the facility must transfer the user to another provider

The recent fire at the Charlotte Maxeke Hospital showed that many cancer patients were not adequately transferred to another provider – transport; waiting time

**Concern:** Bill states once the NHI is fully implemented, the Minister will introduce regulations limiting benefits to services not reimbursable by the Fund

Why can't cancer patients and survivors who purchase their own health insurance through Medical Schemes not decide for themselves what additional services they can afford?

## Registration as Users of the Fund

Eligible persons must register (including children) with accredited healthcare providers/establishments

Supervising adult must register children in a child-headed household

**Concern:** The COVID-19 experience has shown that many adults find it difficult to register for COVID-19 vaccination

Many parents/guardians find it difficult to register children for school placement

What measures are in place to ensure that everyone who needs to register as a user of the Fund, has, or are able, to get registered?

# Advisory Committees

- **Concern:** Bill requires that **only** the Stakeholders Committee requires representation from civil society and patients
- **Recommendation:** Civil Society fulfils role of watchdog role holding the public servants and the government to be accountable and should be included in all Advisory Committees
- **Recommendation:** Consideration must be taken to include individuals from organisations with a focus on cancer and expertise on all Committees

# Functions of the Fund

## Recommendations

- A risk management system must be in place and Quality Improvement and management systems to be properly in place and reviewed regularly
- Credible Civil Society organisations with track records can be of benefit in being involved as external Quality Assurers
- The Fund must enter into contracts for the purchase, procurement and supply of health care services, medicines, health goods and health related products with health care providers that are accredited



# Functions of the Fund

## Recommendations

- Systems that are credible and ensure continuity of service provision through delivery of sufficient quantities and quality to meet the needs of users
- Must guarantee that there will be no interruption to supply for the duration of the contract as this will be detrimental to the health of the patients
- The Bill must clearly state the provision of Cancer treatment with no delays and interruptions
- Back-up plans for service providers need to be in place to avert any possible stock out and prevent treatment interruptions

# Functions of the Fund

## Recommendations

- The Fund must ensure that the pricing does not compromise the cancer related treatments as these are generally expensive

# Powers of Fund

## Recommendations

- To involve civil society organisations in cancer care so as to advocate for price reductions and take measures to ensure that the funding of health services is appropriate and consistent with the concepts of primary, secondary, tertiary and quaternary levels of health care
- CANSA calls for improved monitoring and evaluation of quality and standard of health care services which will put proactive measures to deal with any adverse situations

This will ensure that the Fund performs its functions in the most cost-effective and efficient manner possible and in accordance with the values and principles enshrined in the Constitution

# Referral Pathways

## Recommendations

- Referral pathways must be realistic and be well known to the services providers, health department personnel and the users
- Referral pathways must be improved especially for the rural communities in relation to cancer services, to prevent delays and interruptions in treatments
- Effective referral systems from the community to the health care facility are essential to save lives and ensure quality and a continuum of care.
- The effectiveness of referral systems depends on multiple factors that involve:
  - clients/community members
  - community health workers (CHWs)
  - facility-based health care workers.
- Each stakeholder is dependent on the other and could form either a barrier or a facilitator of referral within the complex health system

# Referral Pathways

## Recommendations

- Transport services for patients also need to be considered to assist patients to honour their appointments as per given schedules
- The Fund must improve access to screening for cancer to improve early detection through proper provision for screening in the referral pathways
- Patient Navigation systems should be introduced and supported by the Departments of Health to prevent cases falling through cracks
  - This will help in supporting adherence to treatment and retention in the health care system as required by different health conditions.

# Health service benefit coverage

## Recommendations

- The health benefit should seek to ensure:
  - risk reduction
  - health promotion
  - screening benefits
- This will contribute to reducing the disease burden in our health care system.
- Policy provisions must clearly align to realistic service provision on the ground

# Health service benefit coverage

## Recommendations

- The Bill must ensure that the service providers are well informed about cancer signs and symptoms with emphasis on early detection and treatment to be able to refer patients appropriately
- If this is not improved the user will be denied referral from his or her health care provider, leading to late diagnosis when patients have been through the health system at earlier stages of the illness
- When cancer care is delayed or inaccessible there is a lower chance of survival, greater problems associated with treatment and higher costs of care
- :CANSA advocates for a comprehensive package of benefits for cancer patients, which provides
  - screening
  - diagnosis
  - treatment and care with palliative care throughout the illness trajectory

# Access to Health Care Services

## The District Health Management Offices

- There is a need to improve management capacity at district health level
- The governance and accountability structures of the district and sub-district level structures are not clearly provided for

**Recommendation:** Participation and collaboration of all stakeholders and co-ordination of services at District level to be able report on progress in the district, pertaining to:

- difficulties experienced by the Office relating to service provider
- health needs of users that are not being met
- any other matter required for the efficient functioning of health care services in the relevant district



# Access to Health Care Services

## The District Health Management Offices

**Recommendation:** Improved management systems, greater accountability, and enforcement of controls over corruption and training programmes for health professionals at all levels of the health system is necessary through:

- Improvement of clinical and support services
- Improve management of human resources and performance management
- Ensure fiscal discipline
- Reshape governance to improve service delivery
- Ensure that strategic leadership is applied

# Access to Health Care Services

## Contracting Unit for Primary Health Care

- **Recommendation:** capacity building in management as evidence of studies conducted by the MRC (Studies at PHC level-presented at the UHC Dialogue organised by MRC and the National Dept. of Health)
- For example, demonstrated that the clinicians managing the facilities lack support and skills of management and end up relapsing to their clinical functions that they are good at, and overlooking their managerial roles that lead to mismanagement of the health facilities

# Governance in NHI

## Governance within the NHI

The governance structure of the NHI Fund is of important as it will be responsible for financials and decision-making processes

### **Recommendation:**

Governance of the fund is largely on the Minister of Health. The Board of the Fund must be accountable to the Parliament, rather than the minister

**Concern:** There is concern that the Minister will not be able to adequately perform his/her other duties as it seems that NHI will take up all of his/her time

# Governance in NHI

## Complaints and appeals processes

- **Recommendations:** Structures should be in place to ensure smooth processes that will deal with complaint
- We call for proactive approaches that will minimise the need for complaints as these impact on the state coffers due to health litigations, while these are already overstretched

# How to Contact CANSA

Visit the CANSA Website

[www.cansa.org.za](http://www.cansa.org.za)

Utilise CANSA's tollfree telephone line

0800 22 66 22

Write to CANSA

[info@cansa.org.za](mailto:info@cansa.org.za)

Thank  
you



CANSA Toll-free Telephone

0800 22 66 22

CANSA Website

[www.cansa.org.za](http://www.cansa.org.za)

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