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To whom it may concern

Re: Medscheme update – DSP Hospital Networks and co-payments during COVID-19 pandemic

The current global pandemic of COVID-19 has put tremendous strain on both Health Facilities (especially High Care/ICU) and frontline Healthcare Professionals due to a dramatic & sustained surge in admissions of COVID-19 related admissions. This has tragically not only resulted in the deaths of Healthcare Professionals and Patients but also the near collapse of several well developed and well-resourced health care services globally.

President Ramaphosa's early implementation of lock down and associated social distancing and isolation measures and the implications for accessing health care, have afforded the private health care sector in South Africa precious time to best prepare ahead of a dramatic increase in COVID-19 related admissions. Currently the majority of private hospitals are running at bed occupancy rates far below those prior to lockdown due to various mandated measures being implemented. South Africa has not yet seen the dramatic increase in COVID-19 related admissions experienced by numerous countries and as a result this low bed occupancy remains sustained in private hospitals. In addition national experts are predicting the peak to possibly only occur around September.

Due to this delay in COVID-19 related admissions, coupled with hospitals having low occupancy rates and patients requiring surgery that cannot be delayed indefinitely without further compromising the health and well-being of patients, medically appropriate surgery recommenced on the 4th May 2020. However, relevant professional bodies (including SASA, Surgicom and ASSA) have recommended defined criteria governing which patients should be admitted for surgery to prevent unnecessary admissions for surgical intervention. In addition, private hospital groups have implemented various measures to manage surgical cases including limiting occupancy and revised theatre times/number of slots on the slate. Thus we do not see, with the continued delay in COVID-19 related spike in admissions, that the recommencement of surgical interventions will have an impact on availability of health resources.

In addition, the majority of private hospitals, if not all, have implemented strict guidelines governing patient admissions and general conduct in the hospital to lessen infection transmission with a heightened sense of awareness and pro-activity. As a result, hopefully this will prevent the temporary closing down of private hospitals like we have seen in recent weeks.

Taking all the above into consideration, as the situation currently stands, Medscheme, on behalf of its administered schemes have elected to maintain Hospital DSP networks as they currently stand. However we are continuously assessing the situation and if there should be any developments or changes in the status quo then we will certainly revisit and reassess the situation.

Please refer to Annexure A for scheme specific details in respect of Hospital DSP's and co-payments during the COVID-19 pandemic as the situation stands at the time of letter communication.

Kind regards

Health Professionals Strategic Unit

Annexure A: Scheme specific Hospital DSP Networks and co-payment rules during current COVID-19 pandemic

Scheme	Current Hospital DSP and Network Status/co-payment rules
AECI	N/A – no DSP Hospital Network in place
Barloworld	N/A – no DSP Hospital Network in place
Bonitas	Current DSP Hospital Networks stand and co-payments for non-use of DSP Co-payments will be waived in identified Hospitals for positive cases only
Fedhealth	Current DSP Hospital Networks stand and co-payments for non-use of DSP Waiver of co-payments based on review and at Fund's discretion
GEMS	Current DSP Hospital Networks stand and co-payments for non-use of DSP Non-DSP co-payments will be overridden in cases of emergency and where there is no DSP hospital within 50km with the requisite capability.
Hosmed	N/A – no DSP Hospital Network in place
Horizon	N/A – no DSP Hospital Network in place
MBMed	N/A – no DSP Hospital Network in place
Medshield	Current DSP Hospital Networks stand and co-payments for non-use of DSP Positive cases: waiver of co-payment for non-use of DSP co-payment at Scheme's discretion
Nedgroup	Current DSP Hospital Networks stand and co-payments for non-use of DSP Waiver of co-payments based on review and at Fund's discretion
Parmed	N/A – no DSP Hospital Network in place
Polmed	Current DSP Hospital Networks stand and co-payments for non-use of DSP Non-DSP Co-Payments will be overridden in cases of emergency and where there is no DSP hospital within 50km with the requisite capability.
SAMWUMED	Current DSP Hospital Networks stand and co-payments for non-use of DSP Non-DSP co-payments will be overridden in cases of emergency and where there is no DSP hospital within 40km with the requisite capability

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