

Controversial NHI will depend on tech for success – IT WEB

30 October 2019

Technologies such as mHealth, remote monitoring tools and portal technology will play an important role in the success of the proposed National Health Insurance (NHI).

This was the word from Dr Raymond Campbell, founder of e-health solutions firm [Phulukisa Health Solutions](#), speaking at the release of the Future Health Index 2019 results by Philips this week.

Spearheaded by the Department of Health, the NHI is a health financing system designed to make sure all citizens of SA and legal long-term residents are provided with essential healthcare, regardless of their employment status and ability to make a direct monetary contribution to the NHI fund.

In August, the [NHI Bill](#) was introduced to Parliament, and is currently under consideration by the National Assembly's Portfolio Committee on Health.

With large numbers of people dying prematurely due to treatable conditions not being treated on time and preventable diseases not being prevented, the NHI promises to offer patients access to a defined package of comprehensive health services, including a wide range of private health services.

Once fully implemented, it is expected to significantly increase the number of people accessing private and specialised healthcare services, and massively increase queues at health institutions across the country.

See also

[Telehealth untapped in local healthcare industry](#)

[Minister wants coherent e-health services](#)

Campbell shared an overview on how technology is expected to impact on the NHI, by increasing efficiency, productivity, streamlining processes and enabling queues to move quicker.

“Local healthcare institutions are currently hamstrung with resources in terms of manpower. While we do not have enough resources such as doctors and specialists, we do have enough nurses and over 100 000 community health workers who are working on the ground in local communities.

“We need to harness the power of technology by adding capabilities such as automating decision-making and the on-boarding process, and ensuring nurses and community workers can monitor and engage patients remotely is of utmost importance because access to good quality healthcare is everybody’s right “

On-boarding technologies will play an important role in speeding up the long queues and administrative processes often found in healthcare facilities, he noted.

In addition, the use of telehealth – digital information and communication technologies, such as computers and mobile devices – to access healthcare services remotely will help in managing and pre-empting illnesses before they are diagnosed.

“Tech provides the ability to store patient information and share it across institutions. When patients enter a medical facility, it will become easier to identify them by using a special identity code. This helps in identifying high priority cases and seamlessly directing patients to the right section where they will be assisted,” explained Campbell.

“Currently, there are long queues in healthcare facilities, and electronically screening patients even before they enter the doctor’s room would help in understanding their case and what type of medical attention they require.”

In terms of home-based healthcare, technological devices would be able to assist community health workers to conduct services and make decisions that would typically be made by nurses.

“Well-trained community workers would, for instance, receive medical directions electronically via their mobile phone, run through certain questions, take medical measurements and pull through results to conduct services. Imagine if 100 000 community workers each see 10 patients a day – that would significantly prolong lives.”

The Philips [Future Health Index](#) 2019 report revealed this week that while SA has a keen appetite for digital healthcare technology and remote access to digital health records, only 40% of healthcare professionals are currently utilising digital health records, potentially in part because of challenges around infrastructure and the cost of investing in this type of infrastructure.

“These technologies are already available in SA, but there is a hindrance in implementing them across healthcare institutions. Ensuring they are all up and running by the time the NHI is implemented will all be determined by decision-makers who have a political will from both government and private healthcare facilities. This is why our decision-makers have to have KPIs and deadlines in place, and if they don’t meet certain deadlines, their head must be on the block,” he asserted.

Sparking controversy

The [NHI Bill](#), dubbed the “controversial Bill”, is currently going through a [public participation](#) period, aimed at allowing the public to share their views and inform some amendments, before it goes to the National Assembly for a vote.

Some sections of the Bill have caused an outcry. For example, by 2026, it envisions to have every citizen, refugee or individuals falling into specific categories of foreign nationals that will qualify for the insurance, to be able to access core health services.

Medical aid schemes, as they currently exist, will disappear and health insurers will only be allowed to provide “complementary cover” for health services.

Members of the public have expressed concern, saying the fund will create an extra tax burden for taxpayers and will be a massive vehicle for corruption. In addition, there is much scepticism about how a large and complicated system of this nature will be managed.

However, Dr Campbell believes that if well implemented, the NHI has many benefits.

“At the moment, access to good quality healthcare is a case of the ‘the haves and the have nots’, with much manipulation taking place in the private healthcare sector where some medical insurers are exploiting the system, and overcharging. The NHI will combat that and ensure the right to healthcare doesn’t depend on how rich we are or where we happen to live,” he concluded.