Private Practice Review February 2020

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FOOD FOR THOUGHT (\rightarrow)

The coronavirus and future of health

What does the coronavirus mean for South Africa?, asked Zamanzima Mazibuko, editor of Epidemics and the Health of African Nations in City Press (2 February 2020).



The National Health Department recently announced that it has the necessary systems in place in the event of an outbreak of the coronavirus. The Charlotte Maxeke Academic Hospital, Tembisa Hospital and Steve Biko Academic Hospital are prepared for such an emergency.

"But can these hospitals, and indeed our health system, cope and protect us from an epidemic?"

"If the coronavirus comes to our country, it will be too late to ask if we have the doctors, nurses and community workers needed to treat those affected. South African hospitals and clinics have been known to run out of medication. If we cannot store and provide medicines when we are not facing immediate crisis, how will we be able to respond adequately to an epidemic?," wrote Mazibuko.

 On Thursday, February 12, CNN reported that the coronavirus has killed more than 1,100 people and infected over 45,000 people worldwide.

OPINION:

Why the NHI is bad medicine for South Africa



"The NHI roadshows currently crossing the country amply illustrate the horror ordinary citizens suffer under poorly delivered public health services," wrote Michael Settas of the Free Market Foundation: *Daily Maverick* (4 February 2020).

"Additionally, we hear public health specialists and NGOs enjoining all citizens to support NHI: 'We need NHI to fix our inequitable health system' is the usual argument. But this narrative is a straw man argument. South Africa does not need the NHI Fund or any other form of revised financing structure.

"What South Africa does need immediately, is to fix the management and delivery of public healthcare services – and simultaneously to implement the recommendations made by the Health Market Inquiry to reform the private sector. NHI is no more than a reshuffle of finances - and a truly bad one at that. It has nothing to do with improving the delivery of healthcare or bringing about operational efficiencies."

To read more, click on the attachment: MICHAEL SETTAS

MICHAEL SETTAS

SPECIAL NEWS (\rightarrow)

ETHIQAL



Insurance made personal

What is indemnity cover and why do doctors need it?

A surprising number of GPs and specialists are unaware of the myriad ways in which they could fall victim to litigation, often believing this to be confined to the settlement of a negligence finding following an inadvertent patient injury.

According to Dr Hlombe Makuluma, Medico-Legal Risk Advisor at EthiQal, a division of Constantia Insurance Company Ltd and the first South African provider of both

occurrence-based and claims-made cover to doctors, the risk spreads far wider.

To read more, click on: Indemnity Cover

Indemnity Cover

NEWS ON GOVERNMENT (\rightarrow)

Suspended executive returns to CMS

The Council for Medical Schemes (CMS) has reinstated one of the six senior officials, Craig Burton-Durham, who was suspended for alleged corruption and maladministration last year. An internal investigation found no evidence of wrongdoing. Burton-Durham is among a group of long-serving senior staff whose contracts will not be renewed after March 31.

According to CMS registrar and CEO, Sipho Kabane, the Special Investigating Unit was still looking into alleged maladministration and corruption at the CMS. The lifestyle audits of senior staff that he announced in September had been postponed until April 1.

Medical negligence claims in Gauteng have increased to R29-bn.



News24 reported on February 10, that medical negligence claims in Gauteng increased to R29-bn in the 2018/19 financial year.

The DA's spokesperson on health, Jack Bloom, quoted figures from the latest edition of the SA Health Review, which cites previously unpublished National Treasury figures, confirming that the province's medical negligence claims have increased from R21.7-bn in 2017/18 to R28.91-bn in 2018/19.

Bloom said this stands in sharp contrast to the Western Cape, where medico-legal claims are only R110-m.

Bara staff attendance shock



Chris Hani Baragwanath Hospital, one of the largest in the world, has the lowest staff attendance of the seven largest hospitals in Gauteng, reported *The Star* (3 February 2020).

According to Gauteng MEC for Health, Dr Bandile Masuku, the hospital recorded only 72% staff attendance in 2019. Helen Joseph Hospital has the highest staff attendance at 93%, followed by the Charlotte Maxeke Johannesburg and Tembisa hospitals with 89%.

FINANCIAL NEWS (\rightarrow)



War over pharmacy software dominance

DIS-CHEM-backed technology company Vexall has asked the competition authorities to stop Telkom subsidiary Business Connexion (BCX) from abusing its dominant

position in the pharmacy software industry, reported **Business Day** (4 February 2020). Vexall has accused BCX of forcing its customers to buy value-added services together with the software licence.

About 70% of all scripts processed in SA are dispensed using Unisolv, which BCX first developed in 1993. In the second half of 2019, Dis-Chem, a large shareholder in Vexall, and several other pharmacies gave notice to BCX that they would no longer buy its "value-added services".

The case before the tribunal is the latest in a series of legal disputes between the firms over the software. Some BCX staff members involved in developing and implementing Unisolv resigned in 2019 to join Vexall. BCX claims the resignations were orchestrated, while Vexall says the workers were either retrenched as part of a substantial cost-cutting exercise or resigned to seek job security elsewhere.

Mediclinic wins appeal over North West **Hospital deal**

• **MEDICLINIC**

Private hospital group Mediclinic won its appeal against the Competition Tribunal's prohibition of its proposed acquisition of Matlosana Medical Health Services in North West Province.

The Competition Commission blocked Mediclinic's plans, saying that if the deal was approved there would be less competition in the area and prices were likely to rise. The Competition Tribunal had upheld the commission's recommendation in early 2019. The matter was referred to the Competition Appeal Court, which ruled in favour of Mediclinic. The acquisition includes the 185-bed Wilmed Park Hospital, the 62-bed Sunningdale Hospital and a 51% share in the Parkmed Neuro Clinic psychiatric hospital.

PHARMACEUTICAL NEWS (ightarrow)



Virus poses no risk to production

JSE-listed local pharmaceutical manufacturers Aspen Pharmacare and Adcock Ingram say the coronavirus (2019-nCov) outbreak in China poses no immediate risk to production, as they have buffer stocks of imports used to formulate essential drugs. (Business *Day,* 11 February 2020). The virus has struck more than 40 500 people and killed more than 900 since it was first reported to the World Health Organisation (WHO) in late December. The shutdowns of factories in China had a ripple effect on global supply chains of the active pharmaceutical ingredients (APIs) used to formulate medicines, particularly for generics.



HIV trial fails

Scientists have halted a large SA trial testing an experimental shot, after a routine review found it does not work, reported Business Day (4 February 2020). The HVTN 702 trial, (funded by the US National

Institutes of Health and the Bill and Melinda Gates Foundation), began in 2016, testing a shot



According to Salomé Meyer of the Access to Medicine Campaign, lenalidomide (*Revlimid*) is one of thousands of lifesaving drugs awaiting approval at the SA Health Products Regulatory Authority (SAHPRA). SAHPRA said the backlog was a result of "inadequate funding, staffing, lack of expertise and cumbersome processes". The authority inherited 16 000 applications from its predecessor, the Medicines Control Council.The backlog of applications has been reduced by 46%. Industry players said SAHPRA was dogged by the same staff shortages and lack of expertise that affected its predecessor.

modified to tackle the dominant strain of HIV circulating in SA, clade C. However, a routine, interim review of the HVTN 702 study - conducted by an independent data safety monitoring board in January - found the experimental shot did not provide any protection against HIV. lubricant, and free preexposure prophylaxis.

GENERAL NEWS (\rightarrow)



New SA app to be part of UN showcase

A new SA mobile app, designed and developed by researchers from the Nelson Mandela University in Port Elizabeth, will enable health workers to diagnose and start emergency treatment for patients living in remote areas.

The app, named *Ncediso*, will form part of the African Regional Science, Technology and Innovation Forum to be held in Zimbabwe. Ncediso was developed to educate and assist with the detection, monitoring and evaluation of diseases and can be used to upskill community healthcare workers, including nurses and clinic practitioners, in areas where basic healthcare, First Aid skills and clinics are scarce.

The app can be downloaded from the Google Playstore and be used in offline mode. It does not require connectivity and also does not store any personal information.

Sugar tax not bitter enough, say health campaigners



Business Day reported on February 12, that the nonprofit Healthy Living Alliance (HEALA) is lobbying the Treasury to increase the tax on sugar-sweetened beverages and expand the net to include fruit juices.

In 2018, SA became the first African country to introduce a sugar tax to reduce the consumption of sugary drinks, and incentivise manufacturers to reformulate their products to contain less sugar.

According to HEALA, a 250ml glass of fruit juice contains on average 61/2 teaspoons of sugar, a level comparable to that of many sugary sodas and energy drinks. Karen Hofman, director of the Wits Centre for Health Economics and Decision Science (Priceless SA), said Treasury raised R3.195-bn in the first year that the levy was in force, which went to the national revenue fund, rather than being ring-fenced for health expenditure. The revenue collected for the first three quarters of the current financial year is lower than the comparable period the year before, according to Priceless's research.



'Discovery investigates more black than white health professionals'

At the latest CMS hearing on racial profiling Discovery Health Medical Scheme denied racial bias in its fraud,wasteful care and billing abuse (FWA) investigations.

Discovery said the high number of black investigations is influenced by a high number of external tip-offs, representing more than 60% of all investigations in 2018. According to the medical scheme 55% of its FWA investigations are on black health

practitioners, while they only represent 37% of claims. Discovery estimated that - in the absence of effective fraud control activities - R1.7-bn of member's money would have been lost.

NEWS ON MEDICAL SCHEMES (ightarrow)

Rise in cancer diagnoses and costs show no sign of abating



According to the latest oncology tracker report, released by Discovery Health Medical Scheme (DHMS), the cost for

oncology-related treatment increased by 135% between 2011 and 2018, totalling R3.5bn in 2018. The report also showed that the number of people that were newly diagnosed in 2018 rose to 239 out of every 100 000 members.

In December 2018, 36 959 of Discovery's members - about 1.32% - were actively receiving treatment for cancer. Of these, 8 731 were newly diagnosed in 2018. The number of members who are newly diagnosed has increased by 58% since 2011. The amount the scheme paid for high-cost oncology drugs increased

by 145% from 2011 to 2019. Dr Ryan Noach, CEO of Discovery Health, said Discovery is trying out various risk management initiatives and those saved members R6.8-bn in 2018.

Circulars from the CMS (\rightarrow)

The following Circulars were published by the CMS in January 2020.



5 of 2020 LCBO and Demarcation **Engagement Session**

> 6 of 2020 Real time monitoring (RTM) for 2020

7 of 2020 Adjustment to fees payable to brokers

1 of 2020

Revised Managed Care Accreditation Standards - version 5

2 of 2020 **Quarterly Statutory Returns** Submission for 2019 (Q4)

3 of 2020

Introduction of an online application portal for accreditation and renewal of accreditation by individual brokers and broker organisations

4 of 2020 Patient Experience Survey for Medical Scheme Beneficiaries Living with Diabetes

with effect from 1 January, 2020 8 of 2020

Proposed Levies for Medical Schemes 2020/21 9 of 2020

Data specification for the costing of the primary healthcare services

SPECIAL NOTES (\rightarrow)

Opportunty for a psychiatrist (Cape Town)

Opportunity available for a psychiatrist to join a busy practice in the Northern Suburbs of Cape Town – 4km from Tygervalley Mall. The nearest admitting clinic is Tygervalley Clinic (Life Path Group) also 4km from the practice. Fully furnished room(s) in a tranquil setting, with services included. Ample parking.

Wheelchair access. Rooms available from 1 March 2020 (or earlier – can be discussed). General practice (children, adolescents and adults) with a strong referral network and multidisciplinary approach.

For more information, contact Prof Renata Schoeman urgently at renata@renataschoeman.co.za

Two locums urgently required for Private Psychiatric Practice

The Practice of Dr Nazea Jamie Psychiatrist Inc. is urgently looking for two candidates to split consults. The candidates should preferably be female candidates, but one male and one female could work as well.

Monday-Thursday at the Goodwood Practice Physical address: N1 City Mews, Unit A11, Cnr. Frans Conradie & Manus Gerber Drives, Goodwood

Friday at the Rondebosch Practice (to service patients in the Southern Suburbs) Physical address: Stonefountain Terrace, Suite 113, Summit Sessional Rooms, Rondebosch)

The hours are flexible/negotiable and the rates negotiable. The locum will have use of Dr Jamie's full facilities including two staff members to be at their service etc. for all admin related functions.

> For more info, contact Tel: 021- 595 2592/ 078 561 5625 or Email: accounts@njamiepsych.co.za

Locum for Pulmonologist urgently required

The practice of Dr V Ballhausen has a locum vacancy for a Specialist Physicisn, Pulmonoligst at his consulting rooms in Sunninghill Hospital. **Requirements:**

Applicant must be registered with the HPCSA Medical Insurance compulsary

> For more info, contact Susan: 011 806 1521/7 or Email: drballhausen@gmail.com

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