



HASA 2017 CONFERENCE

Melanie Da Costa: The conference in context

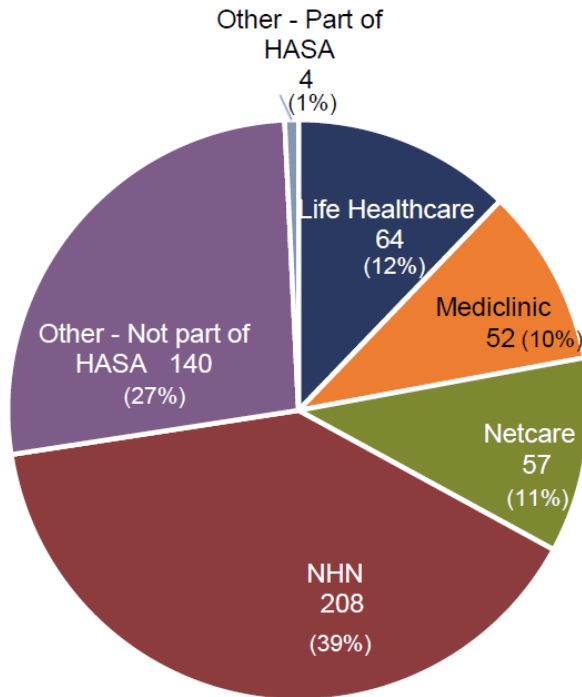
**THE
HEALTHCARE
PUZZLE**

integrating
healthcare

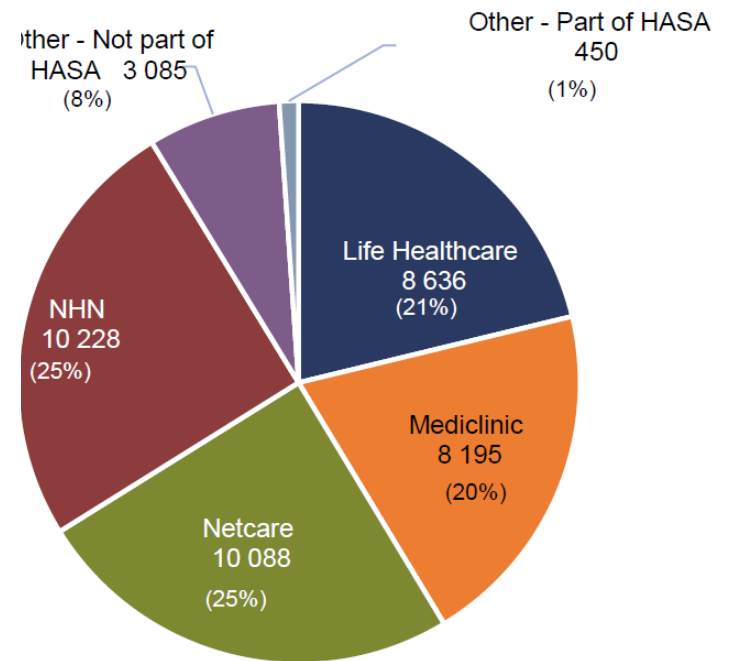


HASA| Private hospital market : 77% of hospitals are independent hospitals

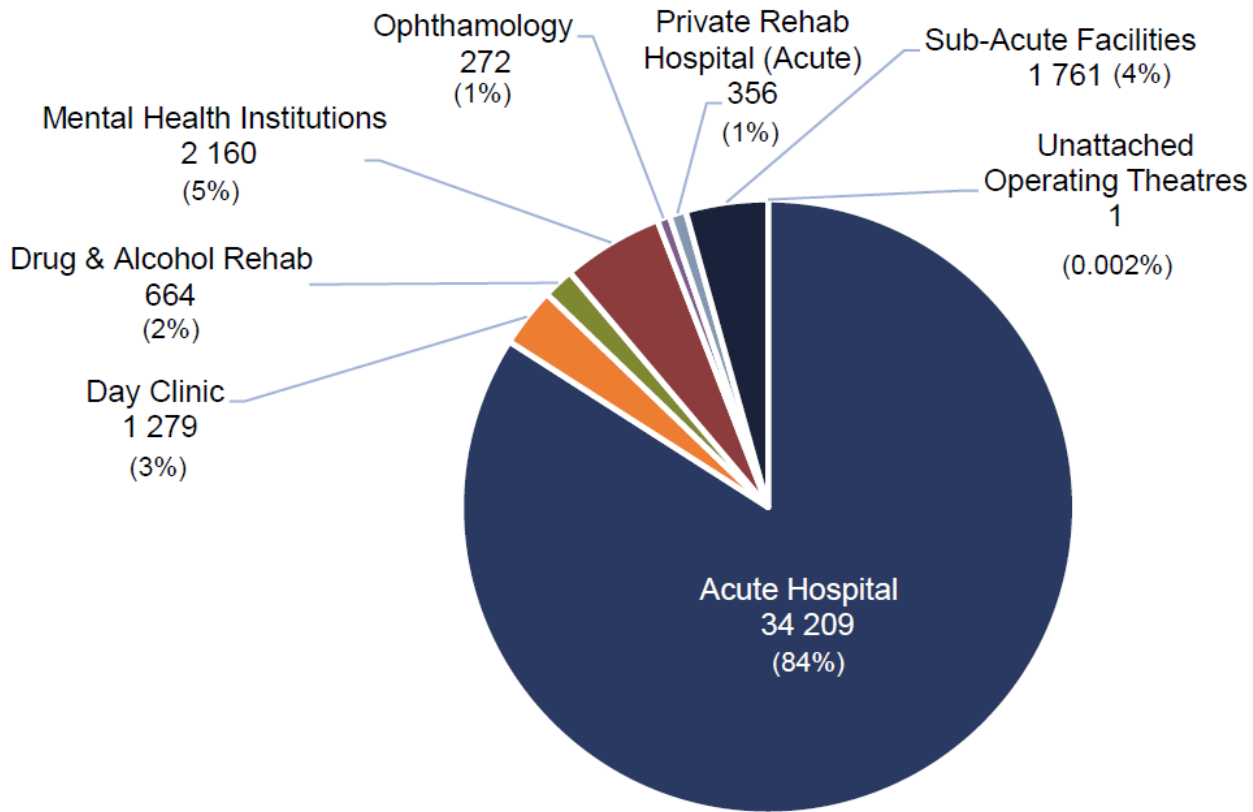
Private hospitals, 521



Private hospital beds, 40,782



HASA| Private hospital market: 84% of hospitals are multi-disciplinary

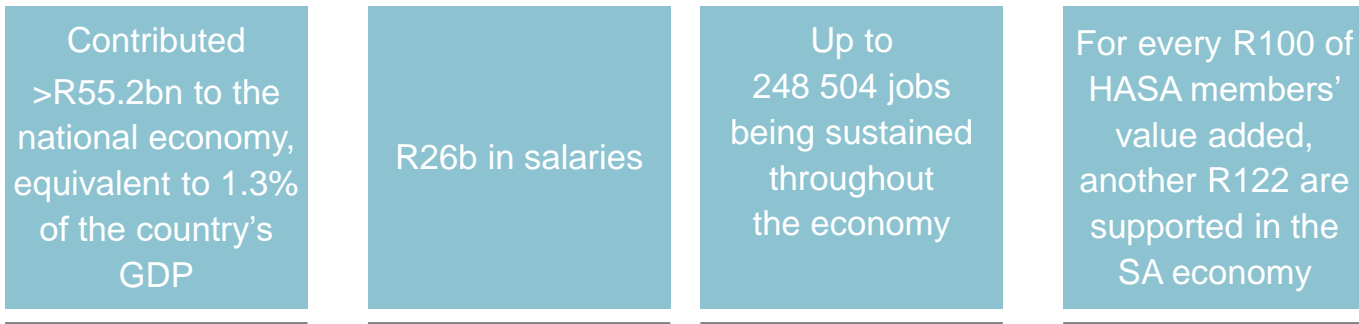


Source: Econex draft paper "Private hospital's business activities impact on the South African Economy"



HASA| Economic contribution and value of private hospital services

In 2016 Private hospitals*:



Stimulating economy-wide production of >R130.3bn



HASA 2017
CONFERENCE

Source: Econex draft paper "Private hospital's business activities impact on the South African Economy"
* Life Healthcare; Mediclinic, Netcare

HASA| Healthcare Century

Healthcare century - healthcare will, by 2100, be the world's largest sector

McKinsey

Source: The McKinsey Quarterly. Health care costs: A market-based view. September 2008. Ibid



HASA 2017 CONFERENCE

Nearly a dozen hospital and health system CEOs in the US were asked the following question in 2016: If you could eliminate one of the healthcare industry's problems overnight, which would it be?



Key themes of 2017 HASA Conference

Nearly a dozen hospital and health system CEOs in the US were asked the following question in 2016:
If you could eliminate one of the healthcare industry's problems overnight, which would it be?

National
Health
Insurance

Healthcare
Market
Inquiry

Quality
outcomes
and patient
satisfaction

Medical
scheme
demand
management

Innovation
and new
markets



HASA 2017
CONFERENCE

Source: Econex draft paper “ Private hospital’s business activities impact on the South African Economy”

NHI | White paper

Universal healthcare is a non negotiable tenet of our society

<p>Phase 1 (2017-2022)</p>	<p>Primary healthcare services (incl. maternal health; school; mental; cataract and elderly arthroplasty backlogs)</p>	<p>Introduce governance and implementation structures</p>	<p>Amend legislation (11 statutes expressly identified)</p>
<p>Phase 2 (2022-2026)</p>	<p>“In later stages of 2nd phase... NHI fund will be established once NHI Act enacted” Will purchase from public & private PHC providers and public hospitals</p>	<p>NHI expanded to incorporate EMS (non-branded) and pathology (incl. private)</p>	<p>Last phase is to mobilise additional resources ‘as approved by cabinet. “selective contracting ... from private will be undertaken in this phase’</p>



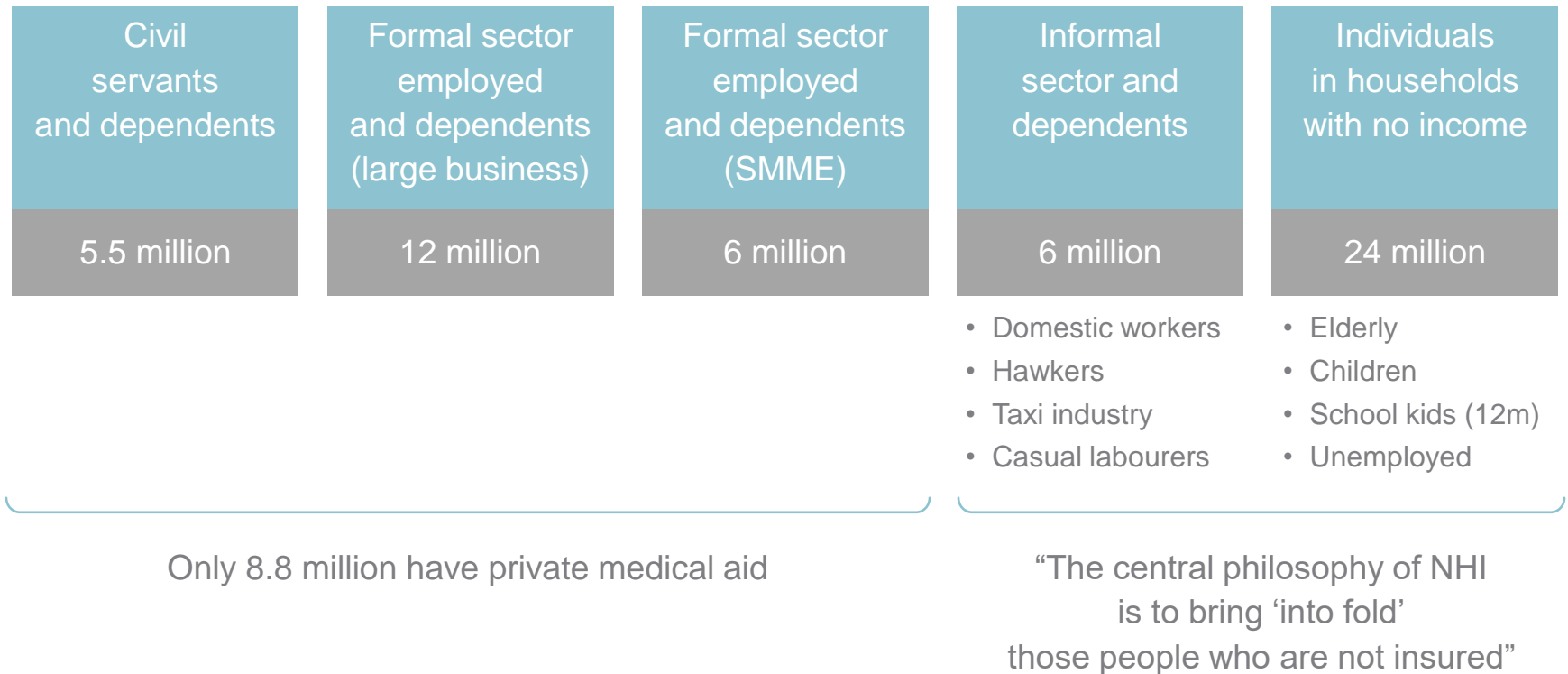
NHI | White paper

Universal healthcare is a non negotiable tenet of our society

<p>Phase 1 (2017-2022)</p>	<p>Primary healthcare services (incl. maternal health; school; mental; cataract and elderly arthroplasty backlogs)</p>	<p>Introduce governance and implementation structures</p>	<p>Amend legislation (11 statutes expressly identified)</p>
<p>Phase 2 (2022-2026)</p>	<p>“In later stages of 2nd phase... NHI fund will be established once NHI Act enacted” Will purchase from public & private PHC providers and public hospitals</p>	<p>NHI expanded to incorporate EMS (non-branded) and pathology (incl. private)</p>	<p>Last phase is to mobilise additional resources ‘as approved by cabinet. “selective contracting ... from private will be undertaken in this phase’</p>



NHI | Context to NHI roll out - population segmentation



NHI | Shorter term priority areas

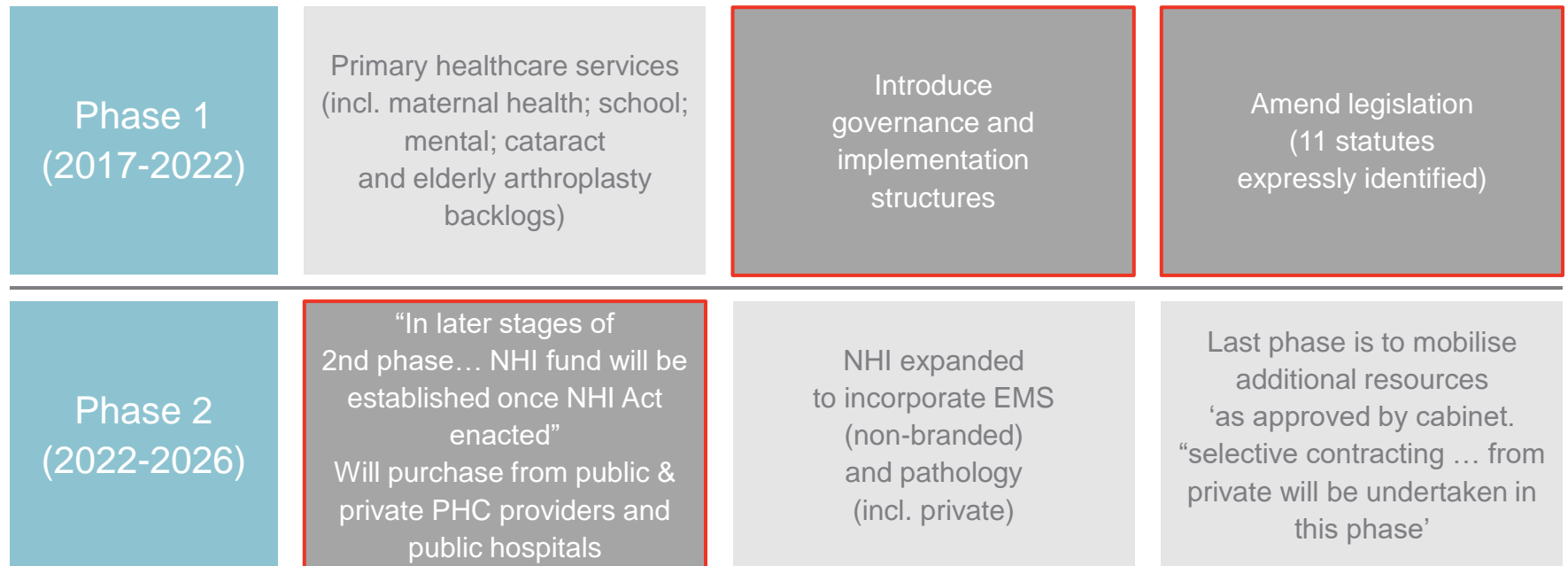
First phase priority: cost of implementation

	Year 1	Year 2	Year 3	Year 4
Mother and woman – pregnancy	5 668 836 834	5 697 181 069	5 725 666 974	5 754 295 309
Mother and woman – breast cancer	4 845 749 609	5 854 456 429	6 888 155 297	7 017 520 185
Mother and woman – cervical cancer	987 576 714	1 211 375 324	1 334 205 349	1 423 655 945
School health	658 263 779	920 533 542	1 737 393 319	1 737 393 319
Elderly – hip and knee arthroplasty	136 116 450	136 797 032	137 481 017	138 168 422
Elderly – cataract surgery	318 182 400	198 864 000	198 864 000	218 864 000
Mental health users: Screening + treatment and care	801 893 939	1 202 840 909	1 603 787 879	1 924 545 455
Disability and rehabilitations	42 000 000	105 000 000	262 500 000	656 250 000
Childhood cancer	778 728 434	875 288 568	945 215 203	1 007 250 433
	14 237 348 159	16 202 336 873	18 833 269 038	19 877 943 068



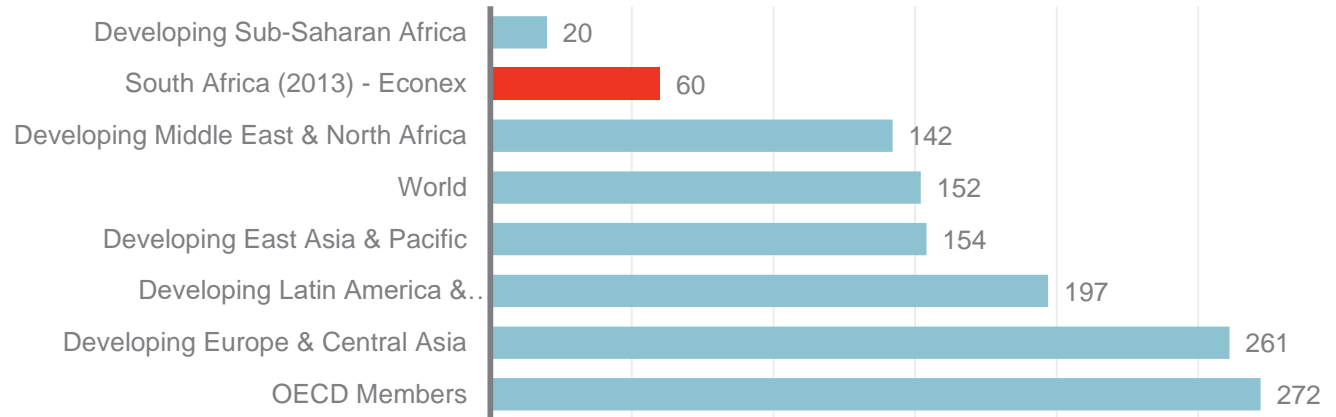
NHI | White paper

Universal healthcare is a non negotiable tenet of our society

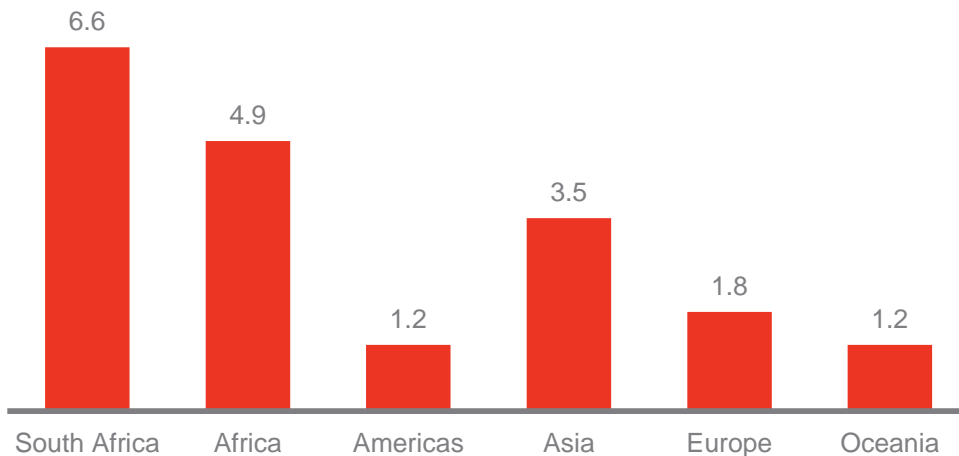


NHI | Private Medical Schools

Regional comparison: all doctors per 100 000 citizens (2010 or latest year available)



Population per medical school, 2013 (millions)



Source: Boulet et al. (2007); Duviviers et al. (2014)

CC Healthcare Market Inquiry | Health outcome measurement and reporting



DISCUSSION DOCUMENT AND CALL FOR SUBMISSIONS

Health outcome measurement and reporting: Improving the cost and effectiveness of clinical care in a competitive private healthcare sector in South Africa

28 AUGUST 2017



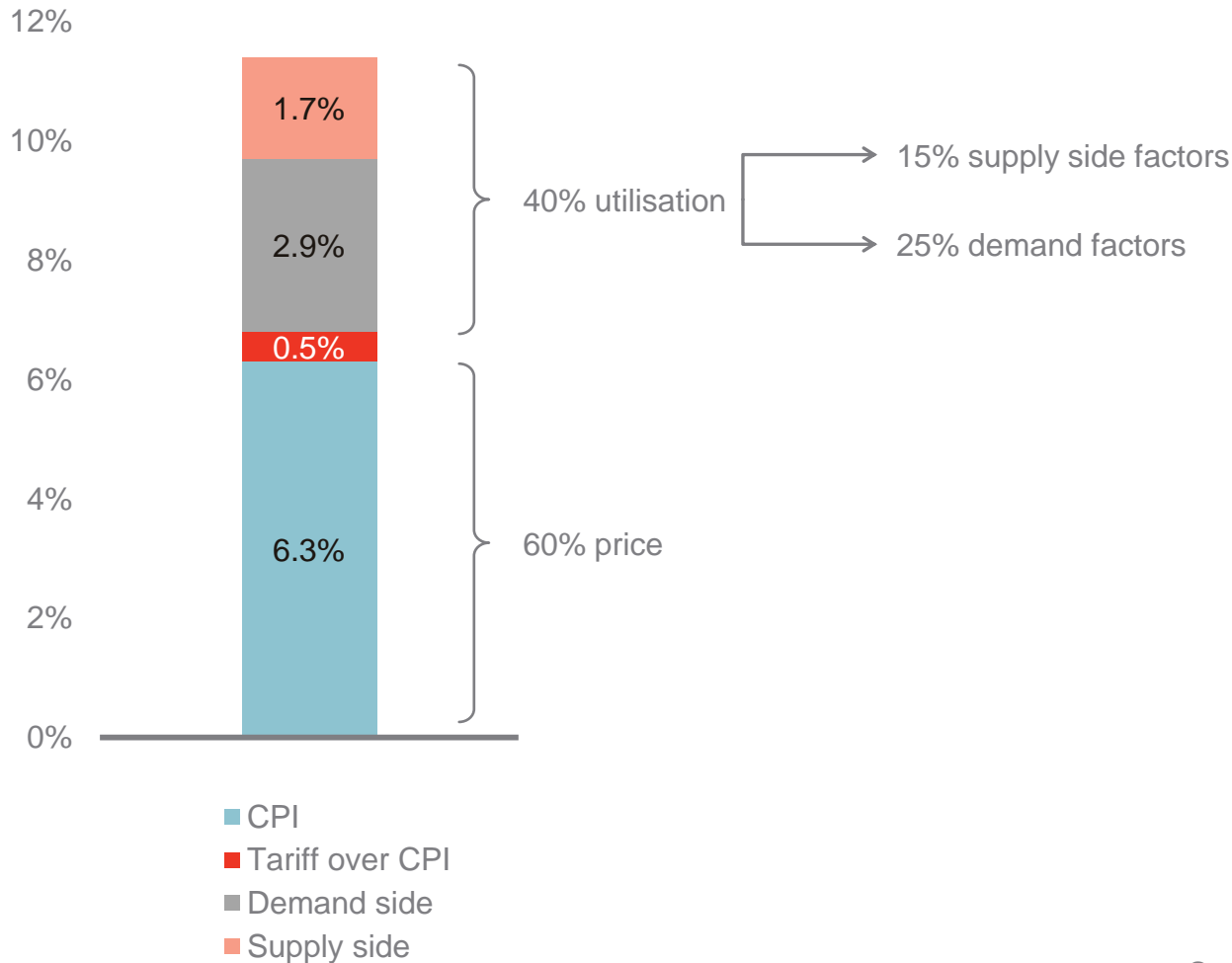
Office of Health Standards Compliance
Ensuring quality and safety in health care



HASA 2017
CONFERENCE

Funders| Medical Scheme demand management

Average annualised Medical Scheme inflation rates 2008-2015



Utilisation:

If utilisation was constant since 2008, contributions would be **27%** lower

Price:

If tariff increases were contained at CPI contributions would be **2,8%** lower

innovation

healthcare

innovation
health
patient
need
really
around
one
money
fact
people
design
work
years
better
process
novel
rather
save
designers
novel
processed
telehealth
anyway
create
course
inadvertently
get
Business
however
term
matter
well-functioned
looking
fact
working
DTI
Regulatory
consultant
adopted
consumers
idea
technology
consumer
new
nurse
experience
found
largely
just
Trade
university
senior
SENSE
University
demand
hospital
understood
enjoys
Despite
benefits
help
despite
convinced
right
practice
take
concern
showing
to
diffused
London
socialist
within
partly
usability
made
every
actually
based
waiting
for
places
article
certainly
Successful
Enterprise
laser
effort
top
amount
enjoy
boundaries
along
market
functioning
future
Reform
industry
impact
gauntlet
used
staff
clinician
production
things
words
space
ideas
never
long
perhaps
work
year
became
time
system
problem
service
good
Administered
time
quickly
administered
spent
made
every
actually
based
waiting
for
places
article
certainly
Successful
Enterprise
laser
effort
top
amount
enjoy
boundaries
along
market
functioning
future
Reform
industry
impact
gauntlet
used
staff
clinician
production
things
words
space
ideas
never
long
perhaps
work
year
became
time
system
problem
service
good
Administered
time
quickly
administered
spent
made
every
actually
based
waiting
for
places
article
certainly
Successful
Enterprise
laser
effort
top
amount
enjoy
boundaries
along
market
functioning
future
Reform
industry
impact
gauntlet
used
staff
clinician
production
things
words
space
ideas





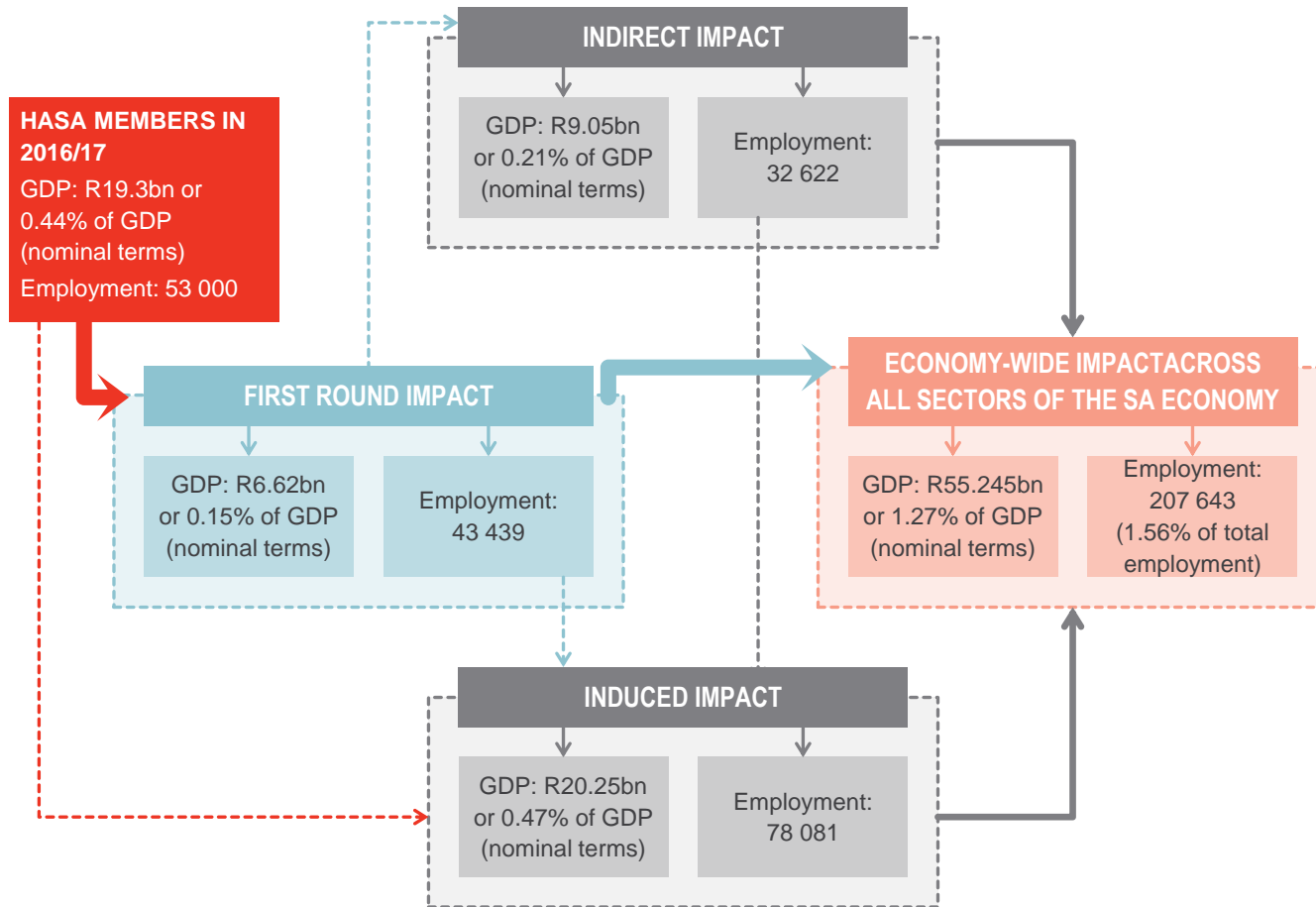
HASA 2017 CONFERENCE

THANK YOU!



Recommend deleting "Figure 27" and rename or refer to it another way?

Figure 27



These results show that a substantial amount of the benefit of HASA members' activities profits the South African economy and people. Figure 27 encapsulates the knock-on effects of HASA members' activities for the South African economy

Figure 27: The linkages of the HASA members to the South African economy