ALIGNMENT OF PMB REVIEW WITH NHI POLICY

Dr Sipho Kabane
BACKGROUND
Consolidation of Risk Pools

Single Service Benefits Framework

Price regulation of health services

Removal of diagnosis based pricing

Co-payments and balance billing

Governance & non-healthcare

Reserves and solvency framework

Jan 2018

April 2018

Jan 2019

Jan 2020
### JANUARY 2018

<table>
<thead>
<tr>
<th>Theme / Project</th>
<th>Activity</th>
<th>Timeframe</th>
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</thead>
<tbody>
<tr>
<td>Consolidation of risk pools</td>
<td>Dissolve 29 schemes that currently do not meet the minimum requirements in terms of number of members as per the MSA.</td>
<td>2018/01/31</td>
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<tr>
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<td>Activity</td>
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<tr>
<td>Single Service Benefits Framework</td>
<td>Reduce the number of benefit options per scheme.</td>
<td>2018/04/30</td>
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<td>Align and reform the PMB package to NHI service benefits, common protocols and care pathways</td>
<td>2018/04/30</td>
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<td>Price regulation of health services</td>
<td>Price regulation for all services included in the NHI comprehensive benefit framework</td>
<td>2018/04/30</td>
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<td>One standard price determined for all health services</td>
<td>2018/04/30</td>
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<tr>
<td>Removal of differential pricing of services based on diagnosis</td>
<td>Change all medical scheme reimbursement from a diagnostic coding basis to services provided.</td>
<td>2018/04/30</td>
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JANUARY 2019

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<tr>
<td>Co-payments and balance billing</td>
<td>Private sector providers will not be allowed to balance bill patients.</td>
<td>2019/01/31</td>
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<td></td>
<td>Develop policy levers that look into price regulation as a means of preventing the growth of co-payments for services which the NHI provides.</td>
<td>2019/01/31</td>
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<td>Governance and non-healthcare</td>
<td>Requires legislative changes</td>
<td>2020/01/31</td>
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PMB REVIEW AND THE NHI
114. “The NHI healthcare services will not be based on a negative or positive list nor on a PMBs type of package. NHI priority setting will be through explicit guarantees using gate keeping at PHC level, a clearly articulated referral system, the use of clinical guidelines and protocols and HTA on the process of priority setting.”
PMB Review: Strategic Approach

• Look at the mandates as articulated in the Policy Paper on the NHI
• Ensure that the PMB Review process is aligned with the NHI policy proposals
• Ensure that the finalised PMB service benefits are in alignment with the NHI service benefits
• Ensure that the PMB Review is done in close collaboration with the NHI Benefits Advisory Committee and other relevant committees
NHI benefits framework

- Primary health care
- Hospital based services
- EMS and patient transport
- Other services
NHI service benefits

• PHC service benefits
  – Disease Prevention, Health promotion, education, PHC outreach homecare
  – Maternal, women, child health, reproductive services
  – HIV and tuberculosis
  – Chronic non-communicable diseases
  – Violence and injuries

• EMS
  – Basic, intermediate, advanced life support
  – Medical rescue, initial assessment, stabilisation, management, resuscitation
NHI service benefits

• Hospital services
  – Emergency medicine
  – Internal medicine
  – Nephrology
  – Oncology
  – Psychiatry
  – Obstetrics and Gynaecology
  – Paediatrics and Neonatology
  – Surgery
  – Orthopaedics
  – Organ transplants
NHI service benefits

• Other services
  – Nutrition
  – Mental Health
  – Oral health rehabilitation
  – Optometry
  – Basic curative
  – Environmental
  – Clinical support
Phase I implementation: April 2018

- Maternal services
  - Antenatal benefits
- Women
  - Contraceptives, cervical and breast cancer treatment
- School children
  - Eye, ear and oral health
  - Childhood cancers
- Elderly
  - Cataract, knee and hip replacement
- Mentally ill
  - Screening, treatment and care
- Disabled
  - Treatment and rehabilitation
Articulated PMB Review Goals

• Reduce burden of disease
  – Prioritise communicable diseases (HIV, TB), non-communicable diseases, violence and injury

• Improve equity
  – Children, women, elderly, disabled, mentally ill

• Control moral hazard and cost escalation
  – PHC gatekeeping, payment mechanism

• Improve allocative efficiency
  – PHC gatekeeping

• Facilitate transparency in accessing healthcare
  – Educate population covered about entitlements
PMB Review Approach

- Service benefits is a key focus area
- Multidisciplinary committees approach
- Priority setting using burden of diseases, cost effectiveness, affordability
- Evidence based, feasibility, scalability
- Guidelines, Protocols and Implementation bottle-necks
### PMB Framework

<table>
<thead>
<tr>
<th>Primary Health Care Package</th>
<th>Hospital Level Package</th>
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<tbody>
<tr>
<td>Preventative Services</td>
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<tr>
<td>Maternal and neonatal services</td>
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<tr>
<td>Child Health Services</td>
<td>Child Health Services</td>
</tr>
<tr>
<td>Curative Services</td>
<td>Curative Services</td>
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<tr>
<td>Mental Health services</td>
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<tr>
<td>Diagnostic: laboratory services</td>
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<tr>
<td>Diagnostic: imaging services</td>
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<tr>
<td>Pharmaceutical services</td>
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<tr>
<td>Emergency medical services</td>
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<tr>
<td>Palliative services</td>
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Way Forward

• Circular 42 of 2017 was published to invite stakeholders to consultative meetings.
  – The aim of the consultative meetings is to engage key stakeholders in discussions to finalise the structures and processes that will be used to drive the PMB Review.

• Appoint members to the different committees (July)
  – >60 CVs received

• Multi-stakeholder workshop (Aug-Sept)

• Invite stakeholders to make submission on the different service benefits (Aug-Sept)

• Schedule meetings to discuss submissions of the different service benefits (Sept>)

• Schedule meetings to cost the service benefits (Sept>)

• Develop a costed proposed basket of service benefits (March 2018)
Review committees

Joint Steering Committee (CMS, NDoH, other regulators)

- Project Manager

- Clinical Advisory Committee on Services Package
- Costing Committee
- Legal & Regulatory committee

- Service Package Sub-Committee
  - e.g. Emergency Services
THANK YOU