
EXPLOITATION OF HEALTHCARE SERVICE PROVIDERS BY MEDICAL AID SCHEMES

2 messages

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To: truth@sabc.co.za

Cc: mpanzaly@sabc.co.za

Thu, Apr 4, 2019 at 5:17 AM

Good morning Sir/ Madam

Hope this email finds you well. Please find the attached copy of the letter for your attention.


Hope you find this in order.

Kind regards,

Ms. Nomaefese Gatsheni - 061 582 6735


PSYCHOTHERAPY & OUT-REACH PROGRAMS

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 **A letter to Special Assignment.docx**
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4 April 2019

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EXPLOITATION OF HEALTHCARE SERVICE PROVIDERS BY MEDICAL AID SCHEMES

Dear Special Assignment

We, Black and Indian healthcare service providers would like to request your intervention in our plight and the struggle we experience with most medical aid schemes in SA. After a long term of observing and witnessing how my fellow colleagues are exploited and harassed by medical aid schemes in the name of audits (fraud) against our private practices I decided to start a whatsapp group called Solutionist Thinking as a platform of voicing out our frustrations and debriefing one another from our daily stress with medical aids.

One would wonder, how do we know that is only Blacks and Indians that are exploited by unfair audits. To answer this, there is a list of names that are circulating around the country from the most leading medical aids (GEMS). In this list it is so clear that Blacks and Indians are faced with a real predicament in the field of health. We have also observed and noted the huge number of exploitive audits conducted by Discovery

Health Medical Aid Scheme followed by Medscheme. One can imagine Discovery as the best as it is taking over to administer most medical aids in the country and compelling all bank employees to join with no alternative option.

In my experience I have observed that month after month, and year after year the medical aid schemes conduct audits of 'fraud' against our practices with the aim of compelling healthcare service providers to acknowledge the debt. Sadly, the manner in which these audits are conducted is oppressive, exploitive and racial as we often witness the number of audits against Blacks and Indian private practices.

Common strategy used on these audits but not limited, the medical aid schemes would send emails to inform us that a review or an audit is conducted against your practice with the following allegations of fraud or concerns:

1. High time codes when compared with your peers
2. Higher cost per claim when compared with your peers
3. Outlier on risk exposure to In-House schemes

Please send us information and provide us with the following information for the members on the attached list (a number of specific patients files) e.g 37 files so that we can continue the claims review process:

1. Copies of clinical notes
2. Copies of your appointment diary in which these consultations were scheduled
3. Validation of time spent with the members

Two things that should be noted during this exploitation:

- A patient's confidentiality is compromised
- An ethical consideration as a professional threatened and your reputation is at stake as the patient can decide to take an action against your practice.

Consequences of refusing to breach confidentiality of the patient will result into unpaid claims which are due to your practice, coercing you as a professional to make unfamiliar decisions as you are desperate to pay your monthly bills.

When you finally give in to their strategy, whether on your own, or with the lawyer's help, you are convinced that you are owing the medical aid a certain amount which you cannot dispute as you are faced with your financial demands.

After acknowledging the debt, some medical aids will tell you to continue seeing your patients, but you will not be paid until the debt is paid up.

Some would just decide on a specific amount for monthly re-payments.

Those who refuse to comply with this oppression would be told that the medical aid would pay the patients, and that patients should pay the practice. This is even worse as patients are not reliable to pay back once the money is deposited in their bank accounts. It also affects the relationship with patients.

The sad part is, after acknowledging the debt in the coming year you wake up, the medical aids tell you that they are no longer covering your profession which would shrink your income and you end up being financially drowning to a point of depression and despair. This situation has resulted into many of our colleagues to commit suicide.

We are not disputing investigations where suspected frauds are due, however the manner in which these audits are conducted is absurd and racial. If there is any fraud committed in our practices it would be fair and just to deal with it as it comes. Why wait and after five years the medical aid is demanding a huge amount allegedly owed by the practice.

Apart from the struggle of audits, each year the medical aids rules change, and would remove the benefits from some of the healthcare service providers. This struggle often affects efficient treatments that are crucially needed by patients. Most of us would feel hands tight and sometimes out of a good heart would give charity work for the benefit of the patient.

We as Healthcare professionals spend most of our time with dedication and commitment to service the lives of our clients and patients. Most of us leave the doors of hospitals we are servicing in mid-night responding to our call of duty. Moreover, when we are finally at home we focus on writing the patient's reports which are not necessarily covered by a medical aid. But at the end of every effort we take to service our society the medical aids see us as threats to their business.

We need the Minister of Department of Health to come to our rescue and address a plethora of challenges we are faced with. We cannot be silent anymore, enough is enough!

Thanking you in anticipation.

Kind regards,

Ms. Nomaefese Gatsheni

A handwritten signature in black ink, appearing to read 'Nomaefese Gatsheni', written in a cursive style.