

AJ

re : Draft Regulations regarding the Demarcation of Health Insurance policies

It is with great alarm that I read reports of the intention of doing away with Gap cover.

I recently had an operation where the Gap cover funded in the region of R30,000 – an amount I could not possibly cover myself. I can in no way afford to upgrade my medical aid – I would assume the only people that can afford comprehensive medical aid are the very ones that can afford to cover the shortfalls.

It is inevitable that I will need further operations, and should I not have Gap cover, will either incur enormous costs or have to rely on state facilities.

The medical profession is no longer regulated in terms of their charges – this forces medical aids to limit the amount they cover, creating the gap. Even a comprehensive medical aid may not cover the full amounts charged by doctors, and there will still be an amount to self-fund. More people will have to rely on the already over-burdened government facilities. This may perhaps even force the better doctors to move to greener pastures, leaving medical care in the hands of the less than best!

Is it wise to remove gap cover because the medical aid companies are feeling the strain? Surely the government should look at protecting the so-called young and healthy people, as we make up the cogs that drive the wheel, and if we are burdened by more medical costs or insufficient medical care, we may become part of the “old and unhealthy” who cost so much to cover.

I trust and hope you will decide on what is beneficial to the people, which is what our government is elected to do.

Sincerely