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Re: Draft Regulations regarding the Demarcation of Health Insurance Policies

I am a private individual on a limited monthly income and have taken out the best medical health plan that I can afford to cover my family medical expenses. Due to the high rate at which Anesthetists and Specialists charge above the medical aid rate and are not regulated I had to take out a health insurance policy. This premium is affordable to me to cover the shortfall that they charge. I can not afford to go onto the top of the range medical health policy to up the rate at which the health company pays at. This will result in me always having an in-hospital shortfall relating to the Anesthetist and Specialist. If you stop the health insurance policies how am I going to afford to pay the shortfall? I have had to have two knee replacements over the last two years and my in-hospital shortfall for the two operations totaled R 32000.00. The health insurance policy I had covered the shortfall, if I did not have it I would have had to go to the bank and apply for a loan and with the new Credit Act and my limited monthly income would I have got a loan to cover the shortfall and put myself into debt. This is what will happen if the health insurance policies are stopped, many salaried people will then be in debt for medical expenses which will result in some people not going to operations to better their health as they can not afford to do it.

Does the government want to put the normal salaried person into debt or stop them from bettering their health by going for operations?

I hereby strongly disagree with the government wanting to stop the health insurance policy as it will affect the health and financial position of many people.