

## FEBRUARY WAS THE MONTH OF LOVE. IT'S TIME TO THINK OF YOUR OWN HEART.



# THE HUMAN HEART PROVIDES THE POWER TO YOUR LIFE, PUMPING 90 000 TIMES EVERY DAY.

Ironically it can also be one of your greatest weaknesses. Almost 1 in every 5 deaths in South Africa are caused by heart diseases. Only HIV/AIDS claims more lives. Heart disease often progress suddenly without any symptoms or forewarning, until a heart attack suddenly strikes. By living healthy and understanding your own health you can prevent heart disease or treat it early before it's too late.

#### SIGNS OF A HEART ATTACK:

- An overwhelming sense of anxiety
  Shortness of breath
  Feeling light headed and dizzy
- Abdominal pain, feeling sick, or vomiting
  The pain can spread to your shoulders, arms, neck
  or jaw
  Sweating
  Chest pain that could feel like pressure tightness, discomfort or squeezing

#### CAUSES OF HEART DISEASE - CONROLLABLE FACTORS

- Stress Smoking Nutrition Body weight Physical activity Alcohol use Diabetes
- Cholesterol
  Blood pressure

#### UNCONTROLLABLE FACTORS:

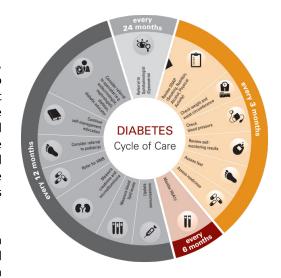
- Age Genetics Family History Poverty
- Gender

\* Information from the Heart and Stroke Foundation.

# RUMED LIFE COACH

Diabetes is a growing concern today. Diabetes occurs when the amount or the functioning of the insulin is inadequate, impairing the uptake of sugar from the blood to the cells. This means that the body cannot control blood glucose levels normally, or use the energy from foods effectively. Instead of feeding the cells with energy, the glucose accumulates in the blood, causing blood glucose levels to rise and, over time causing damage to the kidneys, eyes, nerves and heart.

RUMed has a newly assigned diabetic life coach to help those who are diabetic live a healthy and fulfilled life. You may contact Xolani on wellbeing@providence.co.za or 0860 103 228.



The image sourced from website www.veteransmates.net.au  $\,$ 

#### **WELLNESS DAY**

RUMed will be holding a wellness day in the Eden Grove Foyer.

### 1st March from 10:00 – 14:00

Please come along and be screened for the following at no cost to you:

- Blood Pressure
- Cholesterol
- Glucose (Blood sugar)
- BMI

#### WATER SAFTEY TIPS

Cape Town is not the only city in a water crisis, South Africa as a whole is experiencing a drought. Here are some tips for you to do your part:

- Only flush toilets when necessary
- Don't leave the taps running when brushing teeth.
- Use shower water to feed indoor plants.
- Make sure taps are closed properly and you have no water leaks on your property
- Take shorter showers
- Always do full loads of washing



# NATIONAL HEALTH INSURANCE FOR SOUTH AFRICA

In the state of the nation address on 16 February 2018 the president stated the following:

The time has now arrived to finally implement universal health coverage through the National Health Insurance (NHI). The NHI Bill is now ready to be processed through government and will be submitted to Parliament in the next few weeks. Certain NHI projects targeting the most vulnerable people in society will commence in April this year.



In the 2018 Budget, medical tax credits were not abolished, but were only increased from R303 to R310 per month for the first two beneficiaries (2.3%), and from R204 to R209 per month (2.5%) for the remaining beneficiaries. In addition it was stated that "Over the next three years, below-inflation increases in medical tax credits will help government to fund the rollout of national health insurance,"

The white paper for NHI for South Africa, which was released on 29 June 2017 outlines the country's path to universal health coverage and proposes significant changes in the role of private medical aids. The introduction provides the background and justification of the country's moves to join other countries in introducing universal healthcare coverage.

The document notes that healthcare in South Africa is comprised of a two-tiered system divided along socioeconomic lines. SA spends 8.5% of GDP on health - 4.1% of the GDP on 84% of the population through the public health sector and the balance of 4.4% of GDP on 16% of the population through the private medical aid sector.

The paper argues that this two tiered system has led to fragmented funding and risk pools in healthcare and that the creation of a National Health Insurance (NHI) will improve healthcare equity by combining fragmented private and public health funding pools and eliminating out-of-pocket payments. The paper proposes that the NHI will ultimately deliver a comprehensive package of health services.

#### SOME KEY POINTS REGARDING THE WHITE PAPER:

- The NHI will be a single payer and single purchaser from a central fund. It is envisaged that payment will be more than public sector but less than private sector rates.
- There will be compulsory contributions from all working South Africans funding methods are to be decided (possibilities include a payroll tax or VAT increase) and NHI will be for all South Africans.
- Medical schemes will only offer complementary cover (top up) for services not provided by the NHI and the tax rebate is likely to be eliminated.

3 phases of implementation are envisaged for NHI with the 1st phase the setting up of pilot sites with the focus on the strengthening of the service delivery platform and the overall improvement of quality in the public health sector and the 2nd phase reforming primary care, the setting up the necessary NHI institutions and implementing the required legislative reforms. The 3rd and final phase will focus on ensuring that the NHI Fund is fully functional.

The regulators have made sweeping statements about imminent changes to medical schemes, including dissolving small schemes, reducing the number of options in a scheme and regulating the price of services - all in 2018. However, these changes can only take place when the required legislative reforms are implemented which will take some time. Whilst the objective of introducing universal coverage is positive, the time frames are optimistic. Improving the quality of care in the public sector is going to be a huge challenge and funding the NHI will be difficult given the other demands on state funds. NHI is therefore likely to take a lot longer than is anticipated and there are likely to be changes in the final structure and benefits provided. MMI health will be working with government to ensure the NHI plan, in whatever final form, is a success in South Africa.