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Dear member of the private sector healthcare industry,

RESPONSE TO VARIOUS ALLEGATIONS

1. INTRODUCTION

We have recently received reports and documents regarding a new association called the Namibia Healthcare Service Providers (NHSP). It unfortunately appears that NHSP's member drive includes misinformation about the Namibian Private Practitioners Forum (NPPF). As much as the NPPF has never competed with any association of healthcare providers, and have in fact supported most of them in the past, we cannot sit idly by in the face of untruths being spread about the NPPF. For well over a decade the NPPF has spent substantial time and money to improve the lives and conditions of practice of private sector healthcare professionals. We wish to take this opportunity to provide you with more, relevant information on the NPPF.

2. HISTORY

The NPPF is registered as a non-profit (section 21) company. It was registered with BIPA in 2012 (registration number 21/2012/0830). The inception of the NPPF stems from the fact that numerous entities, (including the medical aid funds, NAMAF and government) were driving the "affordability of healthcare services" agenda (and they still do) while, at the time, no formalised entity meaningfully addressed the crucial flip side of the coin, the sustainability of the private healthcare industry.

The main objective of the NPPF is the sustainability of the private healthcare industry. This entails a plethora of challenges, most notably, the abuse of public power and regulatory overreach, mostly by NAMAF (in collaboration with all medical aid funds), regulatory arbitrage and inefficiency (including at HPCNA, NAMFISA and MoHSS), and the unfair and uneven playing field created by the government (PSEMAS).

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Directors: Dr J Hoffmann, Dr L Pretorius, Dr N Afshani, Dr S Van Rooyen, Dr W Bruwer, Dr P Pretorius
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The NPPF is managed and controlled by seven directors. They are Dr Jürgen Hoffmann (CEO), Dr Nura Afshani, Dr Sophia Van Rooyen, Dr Johnny Jacobs, Dr Willie Bruwer, Dr Pieter Pretorius, and Dr Louis Pretorius.

Dr Dries Coetzee was a founding member of the NPPF, and until recently also a director and the CEO. His legacy in the healthcare industry, also through the NPPF, will live on forever, and cannot be summed up in words. Our directors are volunteers, and provide their time, services and advice to the NPPF and its members free of charge.

The NPPF currently has 169 paying members, all private sector healthcare professionals. Monthly membership fees amount to N\$500. The membership fees have not been increased since the inception of the NPPF 12 years ago. The NPPF's expenses go towards employees (for administration, N\$165,000 at year end February 2024, or 28% of total expenses), legal and strategic consultant and projects (N\$378,700 at year end February 2024, or 65% of total expenses), and rent, stationary and printing, accounting fees and sundries (N\$42,478 at year end February 2024, or 7% of total expenses). The financial statements are annually audited and presented at the AGM.

Included in the fees for a legal consultant and strategic expert is a free, permanent open line to a senior legal practitioner who has a wealth of experience in economics, capital markets, regulation of, and in regulated entities, policy development, strategic planning, legal risk management and statutory impact analyses.

The NPPF responds to every enquiry and complaint received from our members; often also in matters reported by non-members. Despite our funding constraints, we attempt to assist in, and resolve every matter reported to us. This is only possible due to the efforts of our directors, and the continuous availability of our dedicated expert consultant.

The NPPF prides itself not only in its loyal members, but its approach to complex matters which threaten the sustainability of the private healthcare industry. Our approach has always been pro-active, pragmatic, scientific and legally sound. Our numerous successes, often against great odds, have been well documented in member communications over the past 12 years, and also in CEO reports, the latest of which was presented to the new directors in 2024.

The NPPF is truly a multi-disciplinary association, contrary to NHSP's claims that it is an association of specialists. Although many specialists are members of NPPF (two of whom also serve as directors), the members of NPPF include, amongst others, dentists, nurses, GPs, optometrists, psychologists, biokineticists, physiotherapist, occupational therapist and dieticians.

Although the membership to the NPPF has always been open for pharmacists as well, and although the NPPF was always willing to assist the Pharmaceutical Society of Namibia (PSN) upon request, pharmacists never joined NPPF. We suspect the NPPF's active support of the so-called dispensing-case (in which NMRC regulations were challenged up to the Supreme Court) may have played a role in the unwillingness of pharmacists to join NPPF.

3. NPPF ACTIVITIES

The NPPF has always been a very active association, fighting for the rights and interests of its members. Our successes not only benefitted our members, but almost always also the whole private healthcare industry. Registration with the HPCNA is a prerequisite to become a NPPF member. Membership is not extended to associations or hospitals. NPPF only represents individual members to avoid conflict of interest. Our projects included:

- an in-depth analysis of the private healthcare funding industry;
- a cost study (which inter alia found NAMAFA's setting of benchmark tariffs to be irrational and unscientific),
- numerous challenges against regulators (mostly against NAMAFA, but also against NAMFISA, HPCNA, and MoHSS),
- numerous legal opinions, including matters relating to fees for practice numbers, the constitutionality of NAMAFA's setting of benchmark tariffs, unlawful administrative action by medical aid funds, the legal-structural deficiencies of PSEMAS, and many more,
- collective negotiations, including on the PSEMAS "contract",
- numerous industry surveys and press releases, including on the numerous attempts by NAMAFA, the funds and government to taint the image of private healthcare professionals,
- challenge of NAMAFA's attempt to obtain (*ultra vires*) statutory powers through regulations to the Medical Aid Funds Act,

- numerous complaints to regulators on behalf of members,
- legal, financial and expert support in several legal matters instituted by members against regulators for the benefit of the whole industry.

All of the above was made possible by the financial support of our loyal members over the past 12 years. Although our members are few, compared to the total number of private sector healthcare professionals, their support and contributions allowed the NPPF to achieve so many great successes.

Although many of our challenges continue, and it is a never-ending struggle, given the prevailing uneven playing field, abuse of public power, and inefficient regulatory environment, the NPPF has now been well established as the one healthcare association which will never back down in the face of abuse of public power, regulatory arbitrage and overreach, and unlawful administrative action by administrative bodies (including the funds, NAMA, HPCNA, MoHSS, PSEMAS, and more).

The NPPF never took an adversarial or competitive stance against any other healthcare association. Quite the contrary. The NPPF has on countless occasions assisted and advised other associations on numerous matters, including, but not limited to matters pertaining to legal disputes, regulatory abuse, unfair treatment of associations (or their members), policy and strategy. The NPPF has always supported other associations where we could, because the sustainability of the private healthcare industry remains our objective, and all associations play some part in reaching this objective.

4. MISINFORMATION

Given the above, you will hopefully appreciate the NPPF's disappointment when it was reported to us that the newly formed NHSP (allegedly) attempts to paint the NPPF in a negative light by (reported) statements such as "the NPPF is only a moneymaking scheme", that the "NPPF is only an association of medical specialists" and that the NPPF is one of many "single groupings". None of these statements can be further from the truth, as explained above.

The NPPF never competed against any other association for membership. We always encouraged dual or multi-memberships, as different associations play different roles, and focus on different objectives.

The NPPF's expert consultant attended (on invite) the inception meeting of the NHSP. The NHSP is an initiative of the Pharmaceutical Society of Namibia and followed NAMAF's drive to curtail fund expenses on medicines by forcing a reduction of profit mark-ups by pharmacists. The NPPF supports any initiative that stands against NAMAF's *ultra vires*, unlawful, and arbitrary setting of benefits payable by funds. Since its inception the NPPF fought against this abuse of power. The NPPF paid for a legal opinion from a senior advocate which confirmed that a constitutional challenge against NAMAF's setting of benchmark tariffs will likely succeed. The NPPF tried its best to collect sufficient funds (from members, but also the wider industry) to bring such challenge, unfortunately, without success.

The NPPF sincerely hopes that we can collaborate with the NHPS, for our objectives do overlap. However, preciously few associations and individuals meaningfully fight for the sustainability of the private healthcare industry, and we sincerely hope that none of us opt for a strategy of competing amongst ourselves. This will not benefit the private healthcare industry as a whole. A divided industry cannot conquer. Division only serves the interests of those who indeed wishes to divide us.

Yours faithfully,



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