NAMAF's Tariff Decision 'unlawful' HENRIETTE LAMPRECHT WINDHOEK The announcement by the Namibian As-sociation of Medical Aid Funds (NAMAF) that the 2023 standard tariffs will remain unchanged until at least the end of the first quarter of 2024, and possibly long- er, effectively constitutes a reduction in members' benefits because funds will not compensate members for medical infla- tion. Medical inflation is largely driven by exter- nal factors. Some medical funds have al- ready indicated that members' contributions will increase by almost 11%, subject to ap-proval by the the Namibia Financial Institu-tions Supervisory Authority (Namfisa). Continued on page 2

www.named SUM.COM NAMAF Continued from page 1 The Namibia Private Practi. tioners' Forum (N VPPF) is now in consultation with the bra road. er private healthcare indus. try to reques at the Registrar "of Medical Funds - Namfisa " not to allow NAMAI' and medi call aid funds to continu live with their "unlawful actions" a and to covertly reduce member 'Irs' benefits. The NPP'/ responded to to a let. ter to healthcare providers stating that increasing rates would be irresponsible withou co onsidering various intervi "Ven- out tions or strategies due to a cost trends and the resulting agimpact on the be financial sustainabili lity of funds without consultation NAMAF says in a letter by its CEO Steve Tjiuoro that the esc strategies are complex to de level, op and implement, and a grad- ual appro pach is needed. Refer- ring especially to ma anagement strategies for consumption where providers will be invit vited to help manage health infla-tion, Tjiuoro says the goal is his to develop programmes w} where roviders and practitioners pro who commit to active contribu- tions will receive incentiv ives. Therefore, this year's rates re-main as they are until the i in-tended management strategies are implemented to ensure the sustainability of an industry that includes service provision and financing. However, the NPPF says the decision was made without any consultation with medical fund members or service providers. It also refers to the implemen- tation of two options, which, according to this model, involve medical funds paying higher benefits to members whose service providers decide to be part of it and then paying fewer benefits to members whose providers choose the opposite. "Providers who choose to par-ticipate (opt in) are severely restricted in the rates they may charge and are subject-ed, among other things, to a AF disciplinary process," says NPPF in a statement. Violation It also accuses NAMAF of attempting to acquire powers it does not have through its em-powering legislation. This specifically includes powers over service providers and at the expense of members of medi-cai funds. "NAMAF is an administra- live dly, and its unilateral decisions and actions without involving members or their service providers are unconsti- tutional and a lation of the right to just ad ative ac-tion as set out in Section 18 of the Constitut Ition." The NPPF rejects NAMAF's owers to set standard tar- it's as well as the decision to reduce members' benefits by allowing funds not to increase hat them for 2024, "knowing th healthcare inflation will rise" and providers have little con-trol over it.