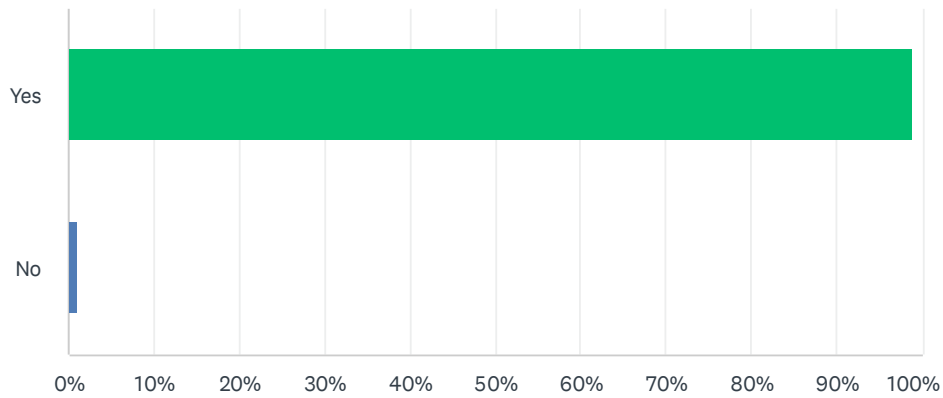


Q1 I am a registered as healthcare provider in Namibia.

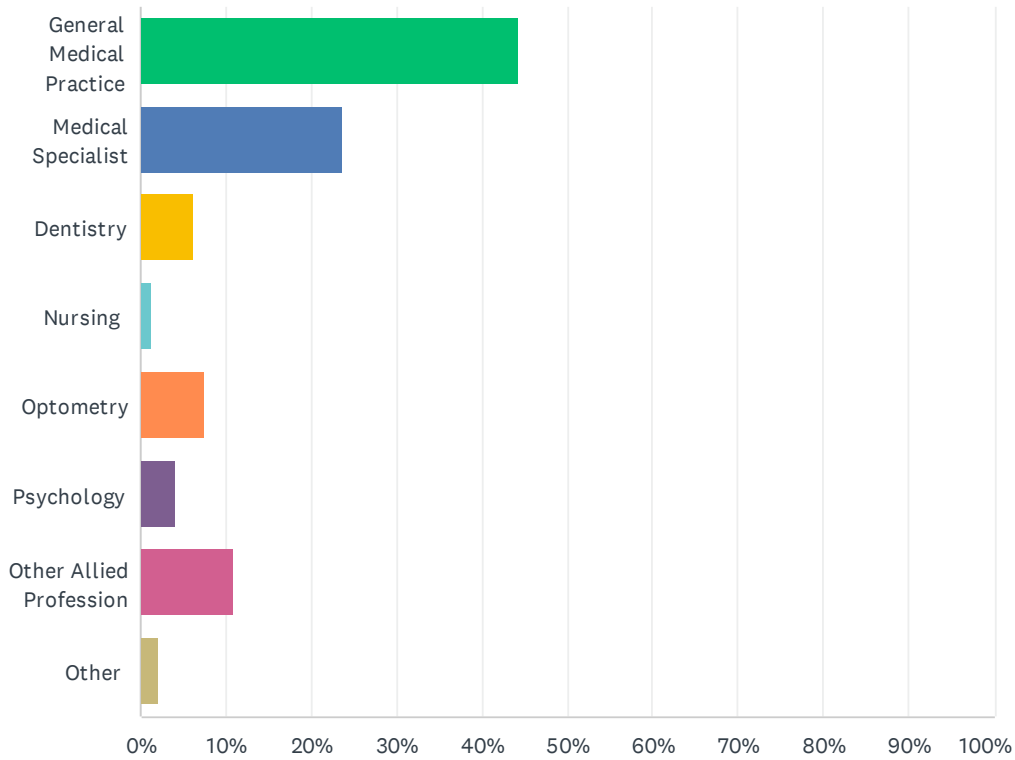
Answered: 301 Skipped: 3



ANSWER CHOICES	RESPONSES	
Yes	99.00%	298
No	1.00%	3
TOTAL		301

Q2 The following describes my medical discipline the best:

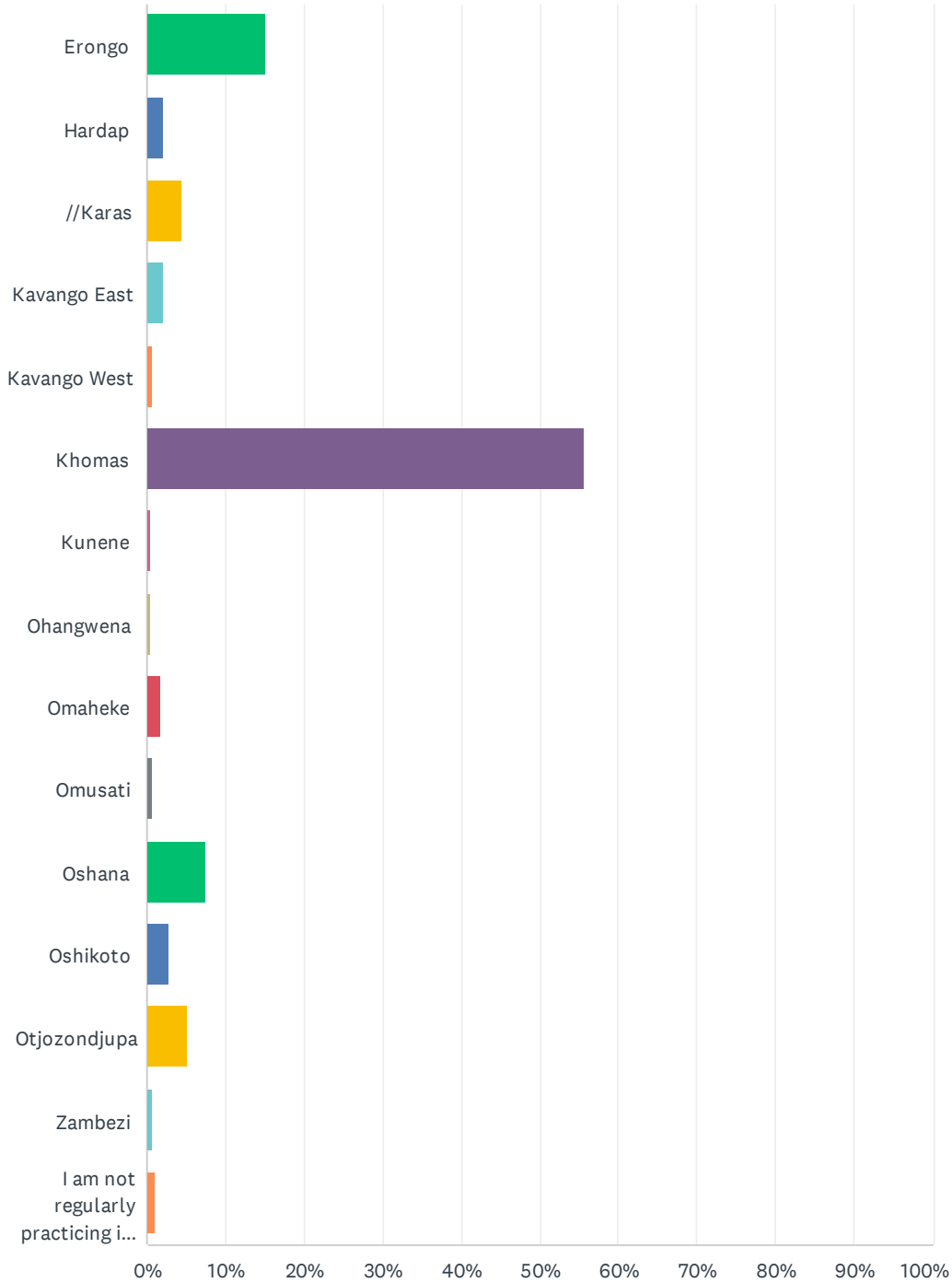
Answered: 295 Skipped: 9



ANSWER CHOICES	RESPONSES	
General Medical Practice	44.41%	131
Medical Specialist	23.73%	70
Dentistry	6.10%	18
Nursing	1.36%	4
Optometry	7.46%	22
Psychology	4.07%	12
Other Allied Profession	10.85%	32
Other	2.03%	6
TOTAL		295

Q3 In which region of Namibia are you practicing your profession most of the time?

Answered: 296 Skipped: 8

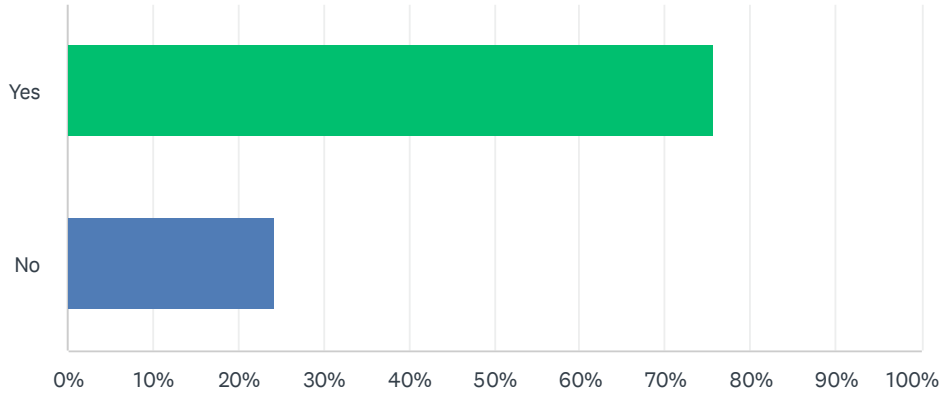


CRITICAL ISSUES AFFECTING PRIVATE SECTOR HEALTHCARE PROVIDERS

ANSWER CHOICES	RESPONSES	
Erongo	15.20%	45
Hardap	2.03%	6
//Karas	4.39%	13
Kavango East	2.03%	6
Kavango West	0.68%	2
Khomas	55.74%	165
Kunene	0.34%	1
Ohangwena	0.34%	1
Omaheke	1.69%	5
Omusati	0.68%	2
Oshana	7.43%	22
Oshikoto	2.70%	8
Otjozondjupa	5.07%	15
Zambezi	0.68%	2
I am not regularly practicing in Namibia	1.01%	3
TOTAL		296

Q4 Are you currently contracted with PSEMAS to provide services to PSEMAS beneficiaries?

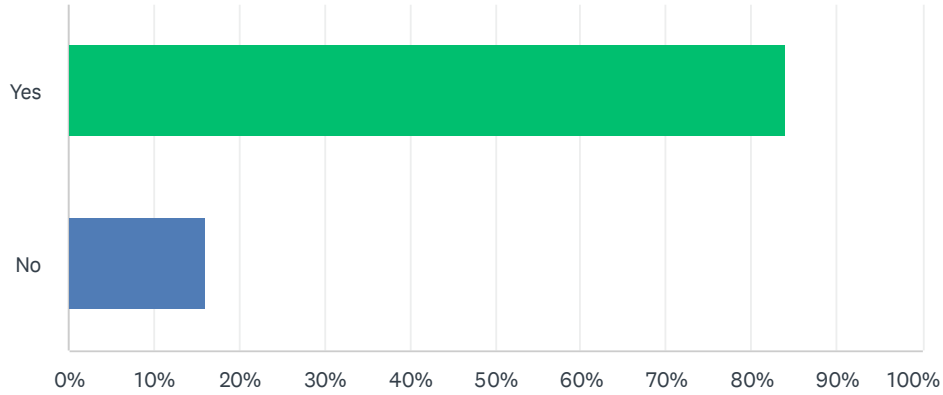
Answered: 295 Skipped: 9



ANSWER CHOICES	RESPONSES	
Yes	75.59%	223
No	24.41%	72
TOTAL		295

Q5 There is still no indication that PSEMAS intends to increase its tariffs (currently at 2014 NAMAFA tariffs). Will you continue your contract with PSEMAS, and treat PSEMAS patients in 2025?

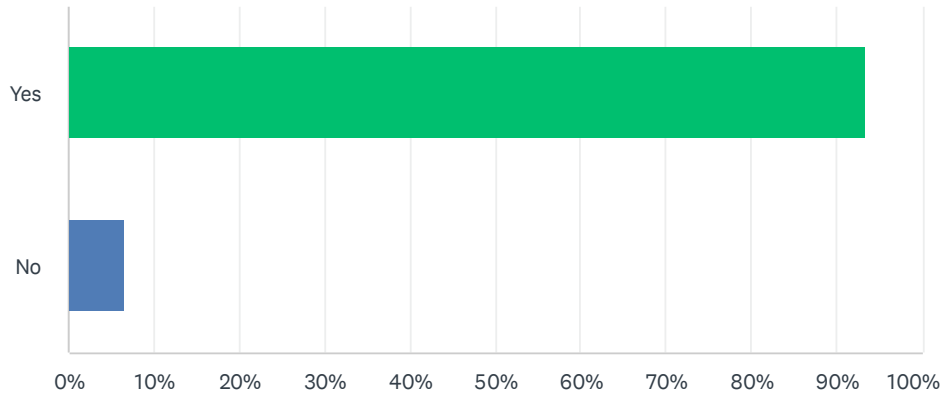
Answered: 218 Skipped: 86



ANSWER CHOICES	RESPONSES	
Yes	83.94%	183
No	16.06%	35
TOTAL		218

Q6 Are you currently making direct claims from private medical aid funds on behalf of your patients?

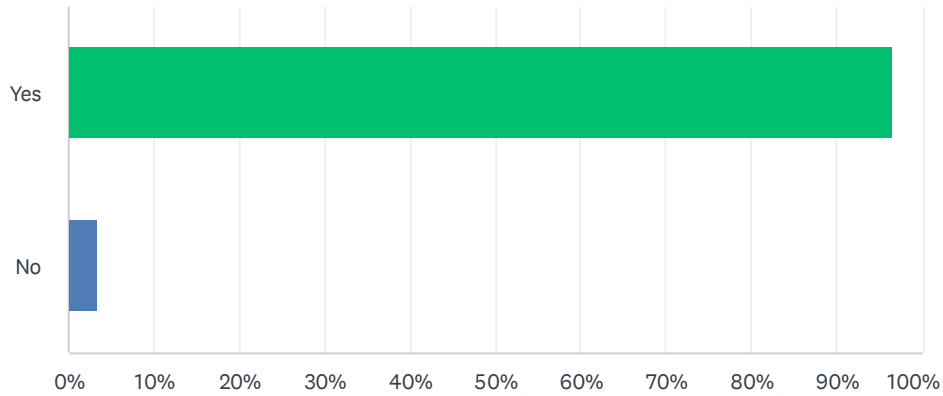
Answered: 288 Skipped: 16



ANSWER CHOICES	RESPONSES	
Yes	93.40%	269
No	6.60%	19
TOTAL		288

Q7 Will you continue to claim directly from private medical aid funds in 2025?

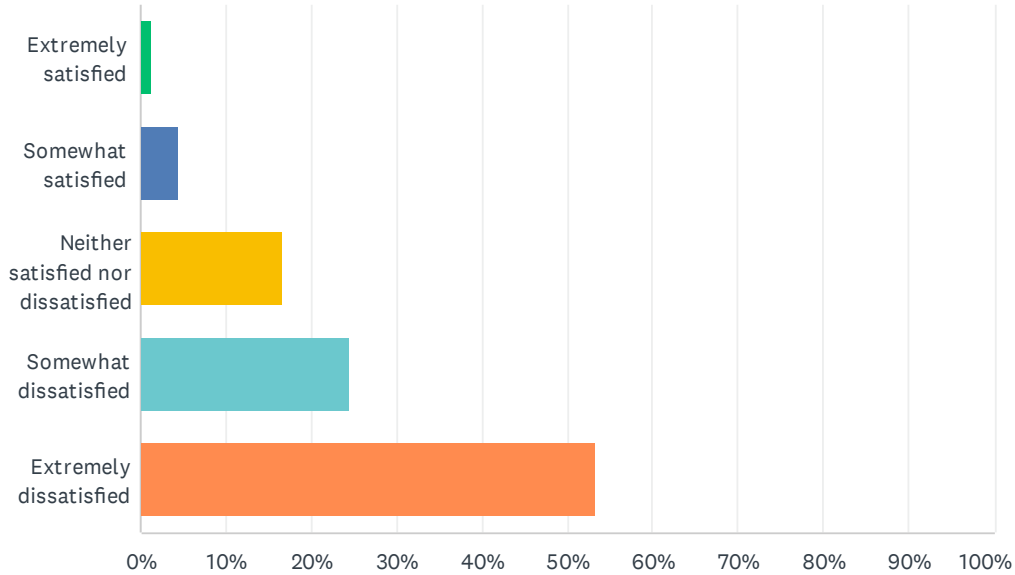
Answered: 267 Skipped: 37



ANSWER CHOICES	RESPONSES	
Yes	96.63%	258
No	3.37%	9
TOTAL		267

Q8 Are you satisfied with NAMAF’s current policies aimed at regulating the conduct and clinical discretion of private healthcare providers?

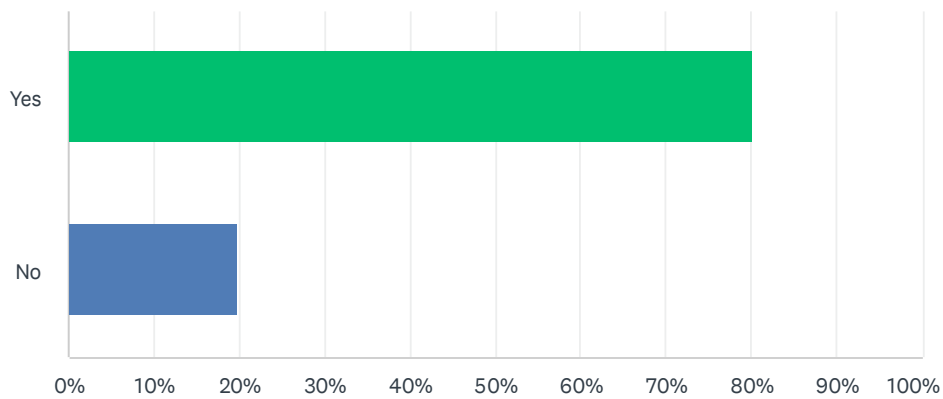
Answered: 248 Skipped: 56



ANSWER CHOICES	RESPONSES	
Extremely satisfied	1.21%	3
Somewhat satisfied	4.44%	11
Neither satisfied nor dissatisfied	16.53%	41
Somewhat dissatisfied	24.60%	61
Extremely dissatisfied	53.23%	132
TOTAL		248

Q9 All the medical aid funds (under the guise of NAMAF) persuaded NAMFISA (the Registrar of Medical Aid Funds) to approve rule amendments to enforce the implementation of the ICD-10 coding system, despite ICD-10 being outdated, and replaced by ICD-11 in the USA and many other countries. Are you aware that, as from 1 January 2025, no fund will accept a claim if a healthcare provider has not complied with the ICD-10 coding system, which includes that the healthcare provider needs to complete the required ICD-10 documents for each claim?

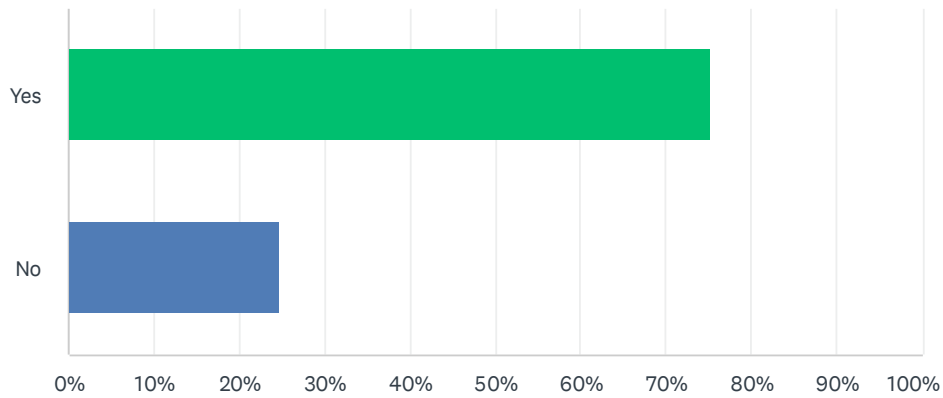
Answered: 251 Skipped: 53



ANSWER CHOICES	RESPONSES	
Yes	80.08%	201
No	19.92%	50
TOTAL		251

Q10 Do you intend to comply with the ICD-10 coding requirements?

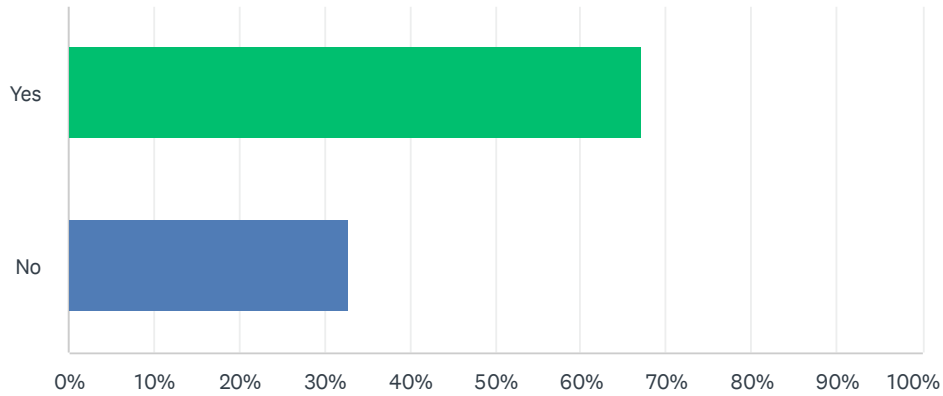
Answered: 247 Skipped: 57



ANSWER CHOICES	RESPONSES	
Yes	75.30%	186
No	24.70%	61
TOTAL		247

Q11 Will the implementation of the ICD-10 coding system increase your administration costs?

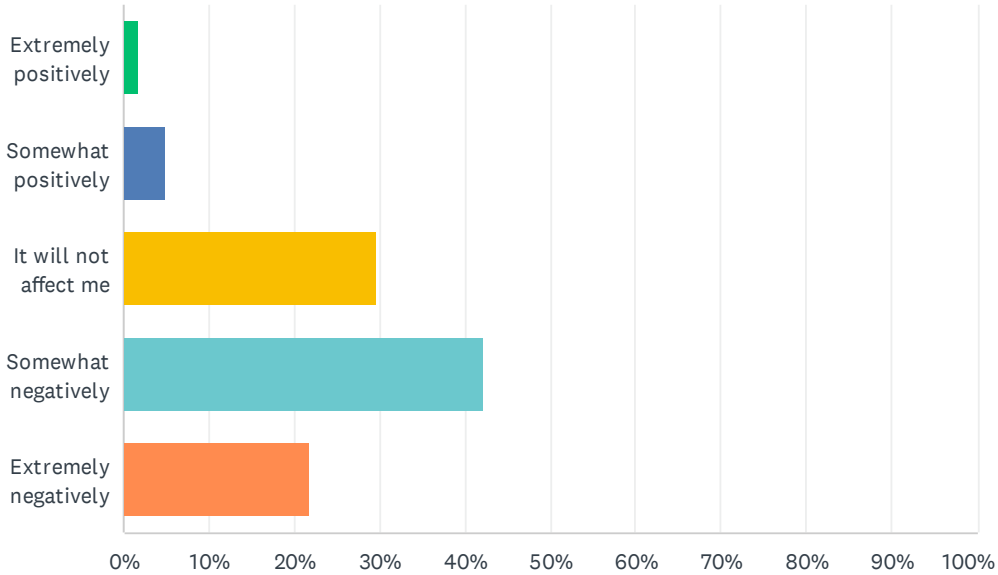
Answered: 249 Skipped: 55



ANSWER CHOICES	RESPONSES	
Yes	67.07%	167
No	32.93%	82
TOTAL		249

Q12 Generally, how will the implementation of ICD-10 coding system affect your practice?

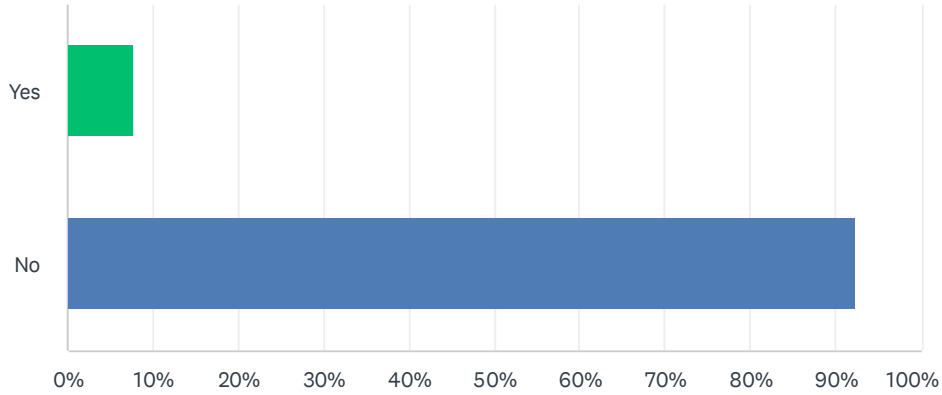
Answered: 249 Skipped: 55



ANSWER CHOICES	RESPONSES	
Extremely positively	1.61%	4
Somewhat positively	4.82%	12
It will not affect me	29.72%	74
Somewhat negatively	42.17%	105
Extremely negatively	21.69%	54
TOTAL		249

Q13 NAMAFA and the funds state that ICD-10 is necessary to “curb fraud, waste and abuse”. Do you believe that the forced introduction of the ICD-10 coding system will be efficient in curbing “fraud waste and abuse”?

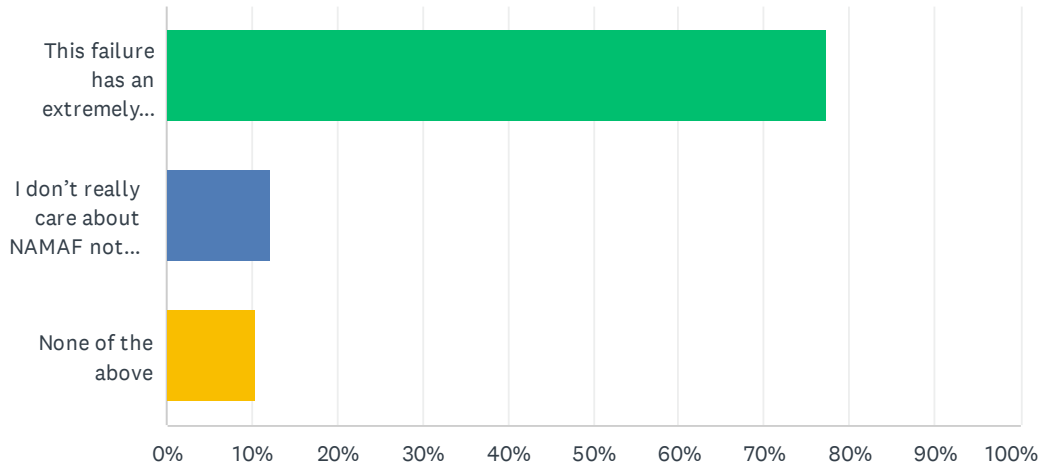
Answered: 250 Skipped: 54



ANSWER CHOICES	RESPONSES	
Yes	7.60%	19
No	92.40%	231
TOTAL		250

Q14 In terms of section 18 of the Medical Aid Funds Act, NAMAF was supposed to set and enforce conduct rules to which medical aid funds must comply. Since 1995 NAMAF failed to do so. NAMAF shows no intention to do so in future. Which statement describes your view on this the best:

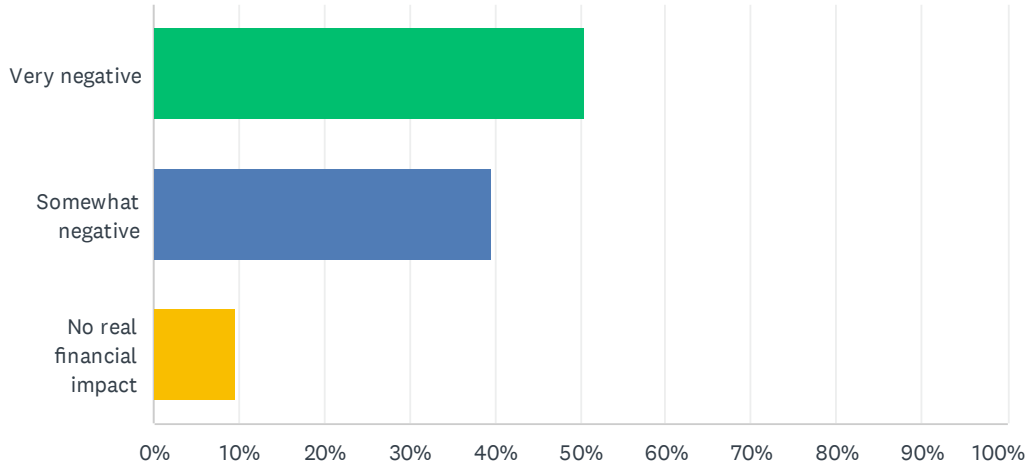
Answered: 248 Skipped: 56



ANSWER CHOICES	RESPONSES	
This failure has an extremely negative impact on the efficient regulation of medical aid funds, and leaves members and healthcare providers without a remedy against the conduct of the funds.	77.42%	192
I don't really care about NAMAF not setting rules for medical aid funds, as I do not think that such rules will in any event improve anything for members or healthcare providers.	12.10%	30
None of the above	10.48%	26
TOTAL		248

Q15 The HPCNA recently announced an increase in fees, including annual registration fees. How do you rate the possible financial impact on you?

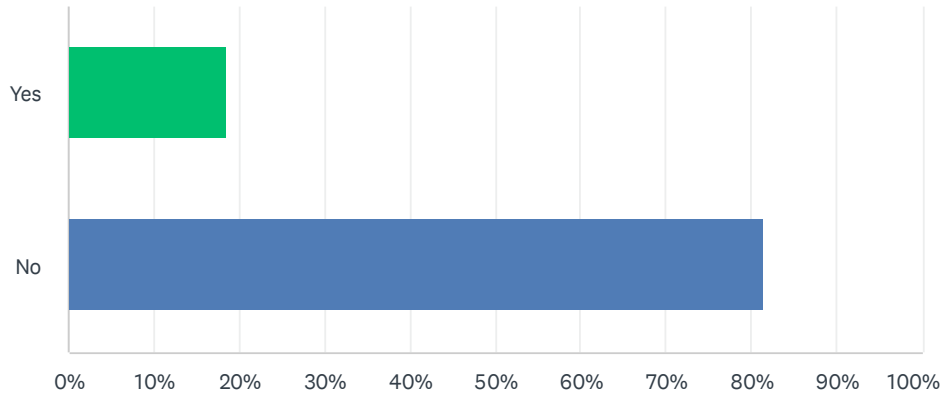
Answered: 249 Skipped: 55



ANSWER CHOICES	RESPONSES	
Very negative	50.60%	126
Somewhat negative	39.76%	99
No real financial impact	9.64%	24
TOTAL		249

Q16 As per the new annual registration fees published by HPCNA, healthcare providers who are not Namibian citizens must pay substantially more than Namibian citizens, even in cases where they are domiciled and worked in Namibian for many years, even decades. Do you believe this is fair?

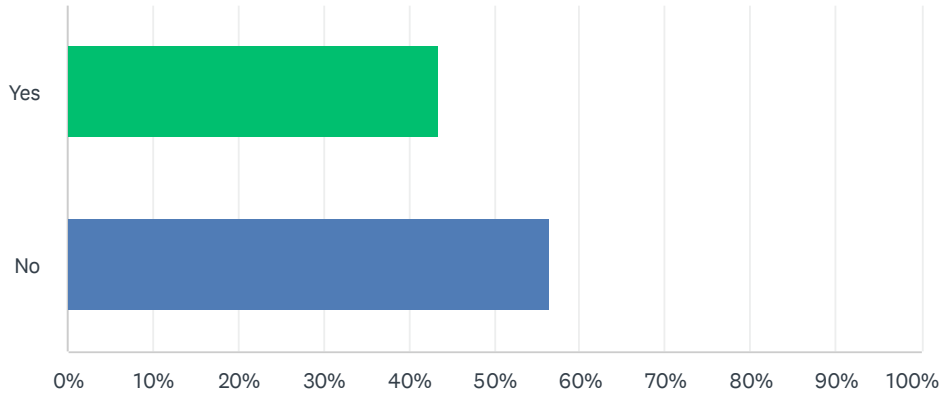
Answered: 248 Skipped: 56



ANSWER CHOICES	RESPONSES	
Yes	18.55%	46
No	81.45%	202
TOTAL		248

Q17 If the non-Namibian practitioners affected by the disparate increase in fees would approach the court to challenge the seemingly unlawful and discriminatory practice, would you be willing to contribute to the legal fees in such case?

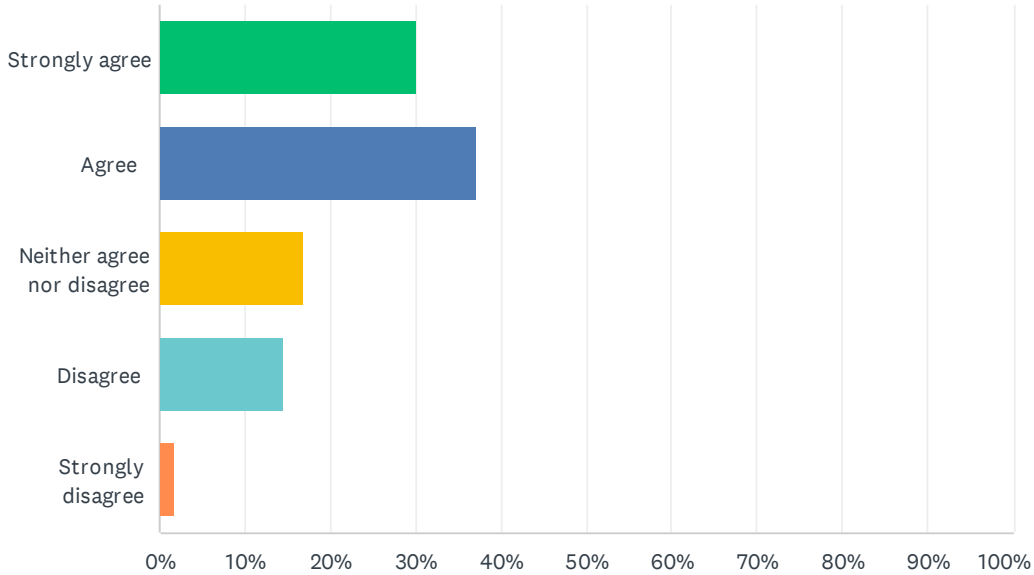
Answered: 244 Skipped: 60



ANSWER CHOICES	RESPONSES	
Yes	43.44%	106
No	56.56%	138
TOTAL		244

Q18 Some say that the Namibian market for private sector healthcare professionals is saturated, even overcrowded. Do you agree?

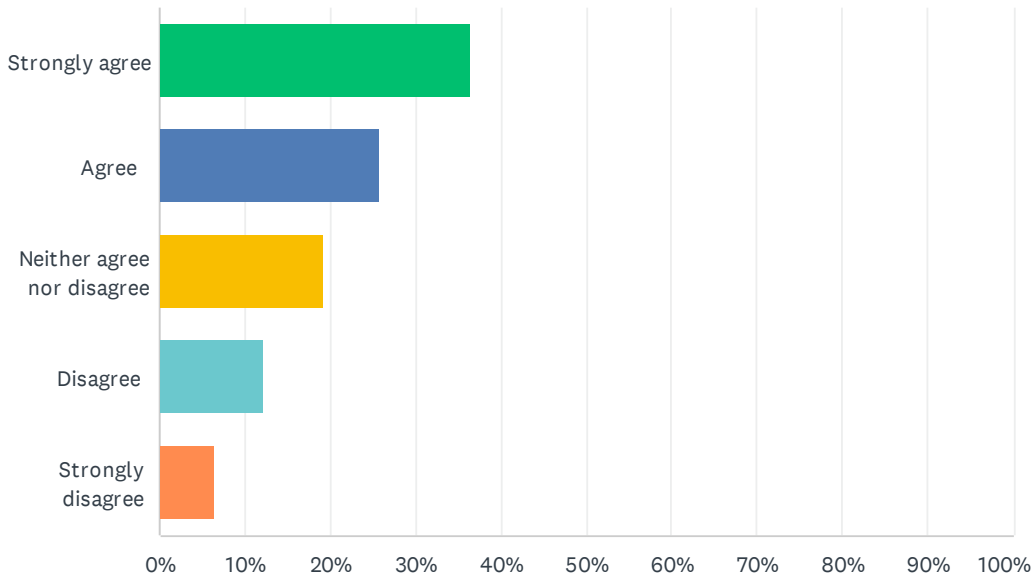
Answered: 250 Skipped: 54



ANSWER CHOICES	RESPONSES	
Strongly agree	30.00%	75
Agree	37.20%	93
Neither agree nor disagree	16.80%	42
Disagree	14.40%	36
Strongly disagree	1.60%	4
TOTAL		250

Q19 Some say that the standards employed by the HPCNA in allowing more foreign practitioners contributes to overcrowding in the private sector healthcare industry, and that this is a problem that the HPCNA must urgently address. Do you agree?

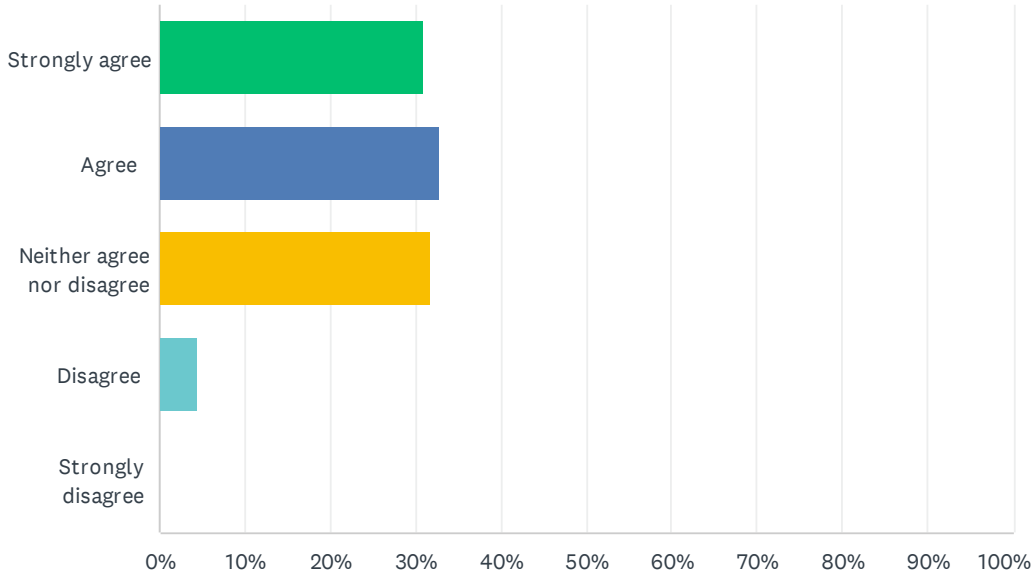
Answered: 249 Skipped: 55



ANSWER CHOICES	RESPONSES	
Strongly agree	36.55%	91
Agree	25.70%	64
Neither agree nor disagree	19.28%	48
Disagree	12.05%	30
Strongly disagree	6.43%	16
TOTAL		249

Q20 Some say that the HPCNA is not efficient in enforcing ethical compliance. Do you agree?

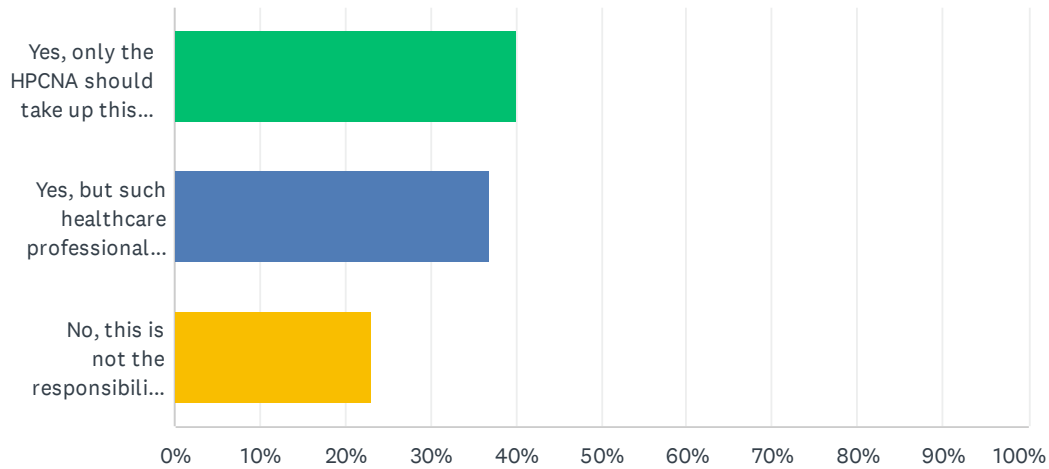
Answered: 249 Skipped: 55



ANSWER CHOICES	RESPONSES	
Strongly agree	30.92%	77
Agree	32.93%	82
Neither agree nor disagree	31.73%	79
Disagree	4.42%	11
Strongly disagree	0.00%	0
TOTAL		249

Q21 Should the HPCNA be responsible for disciplining healthcare providers who make themselves guilty of fraud waste and abuse when claiming from medical aid funds?

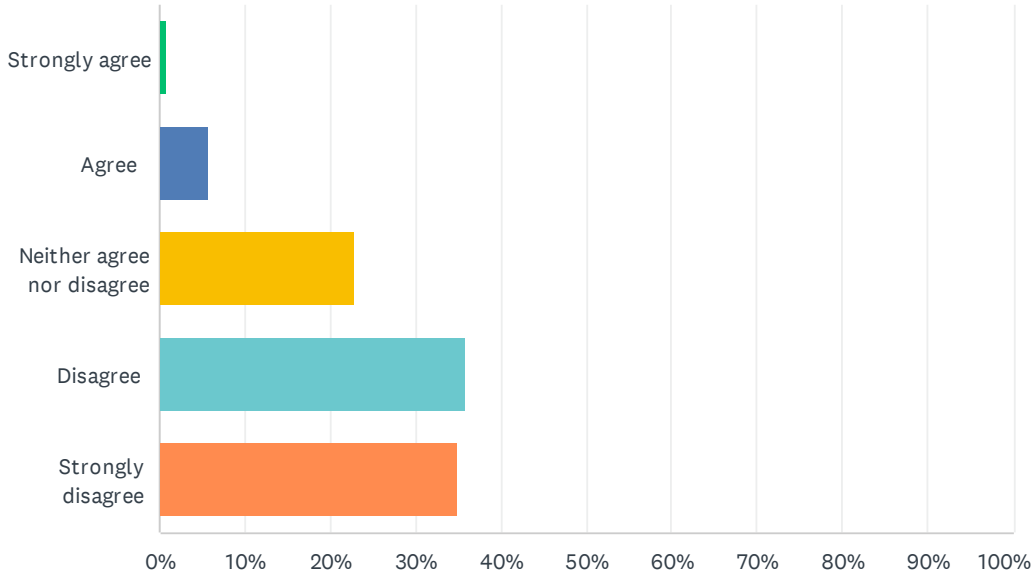
Answered: 247 Skipped: 57



ANSWER CHOICES	RESPONSES
Yes, only the HPCNA should take up this responsibility.	40.08% 99
Yes, but such healthcare professionals must fall under the discipline of other institutions such as NAMAFA and the medical aid funds as well.	36.84% 91
No, this is not the responsibility of the HPCNA at all. Some other institution(s) should be responsible for disciplining healthcare providers under such circumstances.	23.08% 57
TOTAL	247

Q22 Do you agree or disagree that NAMFISA is efficient in regulating the conduct of medical aid funds?

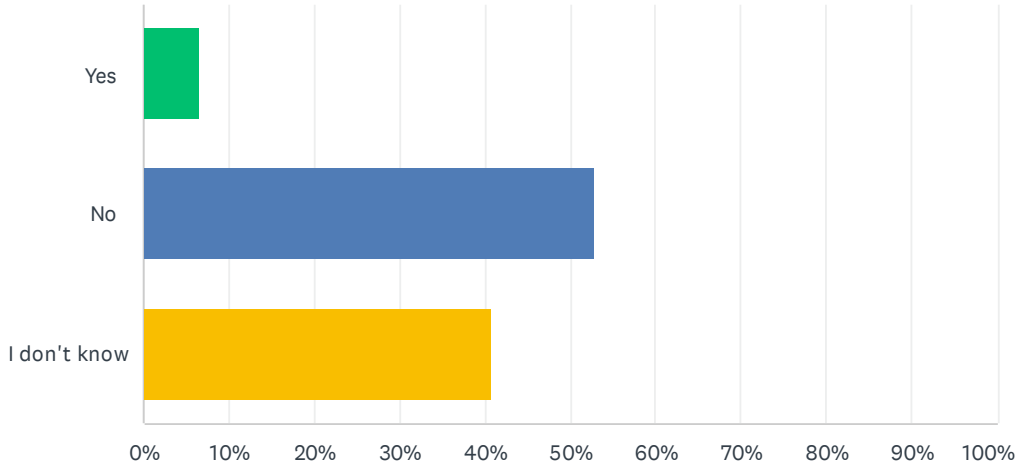
Answered: 246 Skipped: 58



ANSWER CHOICES	RESPONSES	
Strongly agree	0.81%	2
Agree	5.69%	14
Neither agree nor disagree	22.76%	56
Disagree	35.77%	88
Strongly disagree	34.96%	86
TOTAL		246

Q23 Do you believe that NAMFISA (the Registrar of Medical Aid Funds) acted within its powers to approve rule amendments whereby the funds may now demand compliance with ICD-10 before paying claims?

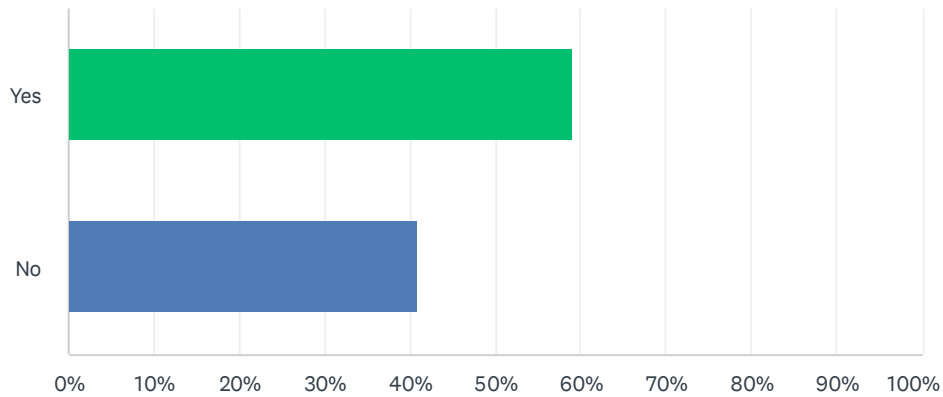
Answered: 246 Skipped: 58



ANSWER CHOICES	RESPONSES	
Yes	6.50%	16
No	52.85%	130
I don't know	40.65%	100
TOTAL		246

Q24 The NPPF is consulting with the South African based health costing firm Healthman to conduct a fee study in Namibia (NPPF did one in 2014 already) and to advise on a possible alternative tariff and claim model. This will be a rather expensive project. Are you willing to contribute to the cost of such a project?

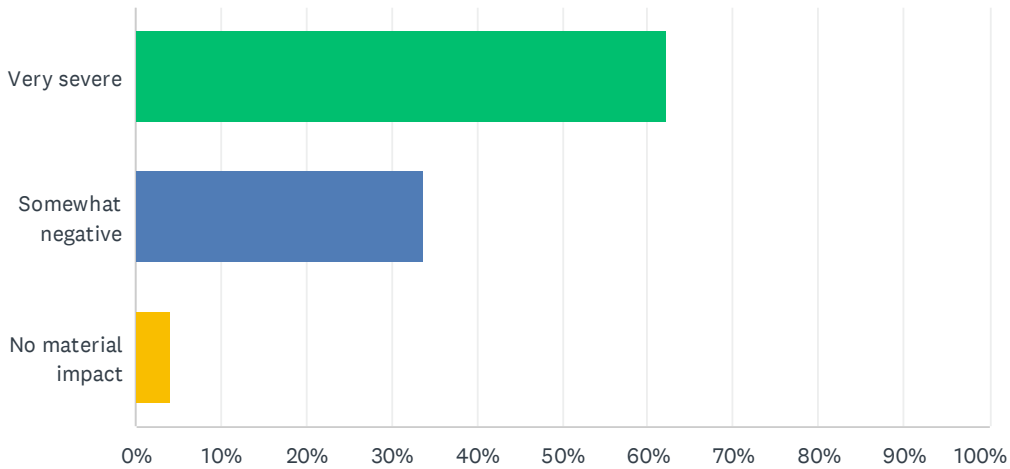
Answered: 244 Skipped: 60



ANSWER CHOICES	RESPONSES	
Yes	59.02%	144
No	40.98%	100
TOTAL		244

Q25 By the end of 2023, all the medical aid funds (under the guise of NAMAf) decided not to increase the benchmark tariffs for 2024. What was the financial impact on your practice?

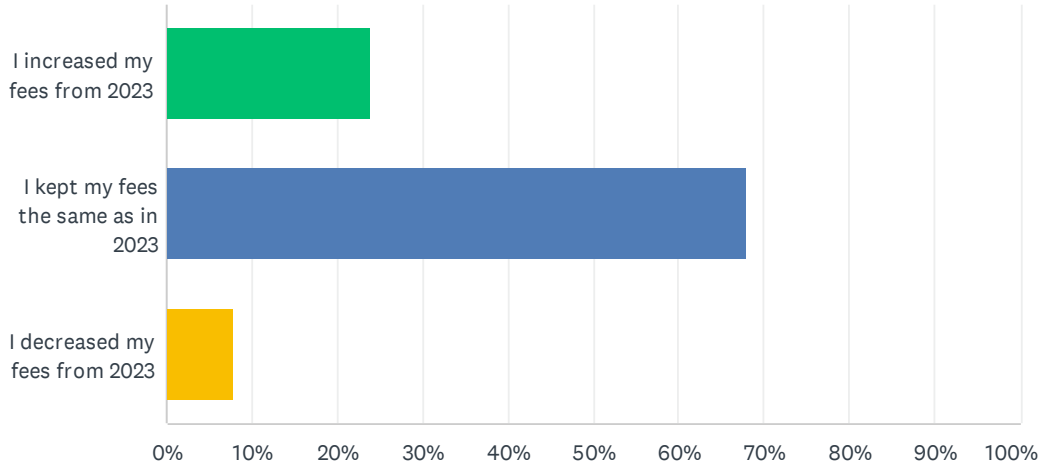
Answered: 249 Skipped: 55



ANSWER CHOICES	RESPONSES	
Very severe	62.25%	155
Somewhat negative	33.73%	84
No material impact	4.02%	10
TOTAL		249

Q26 By the end of 2023, the medical aid funds (under the guise of NAMAf) decided to reduce the benefits payable to healthcare providers performing in-hospital treatment. What did you decide to do during 2024?

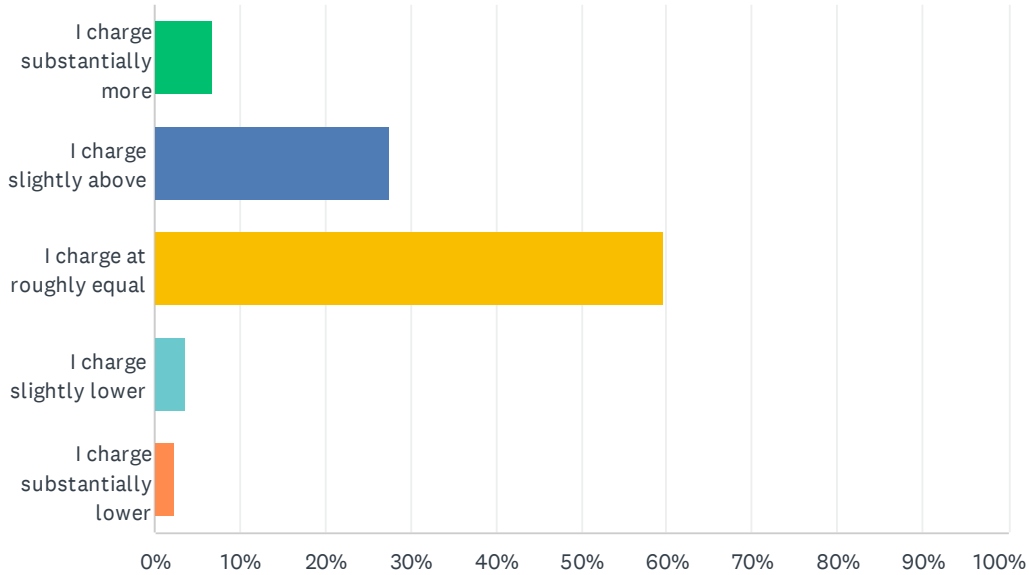
Answered: 238 Skipped: 66



ANSWER CHOICES	RESPONSES	
I increased my fees from 2023	23.95%	57
I kept my fees the same as in 2023	68.07%	162
I decreased my fees from 2023	7.98%	19
TOTAL		238

Q27 How do your current fees (excluding to PSEMAS patients) compare with the NAMAFA benchmark tariffs?

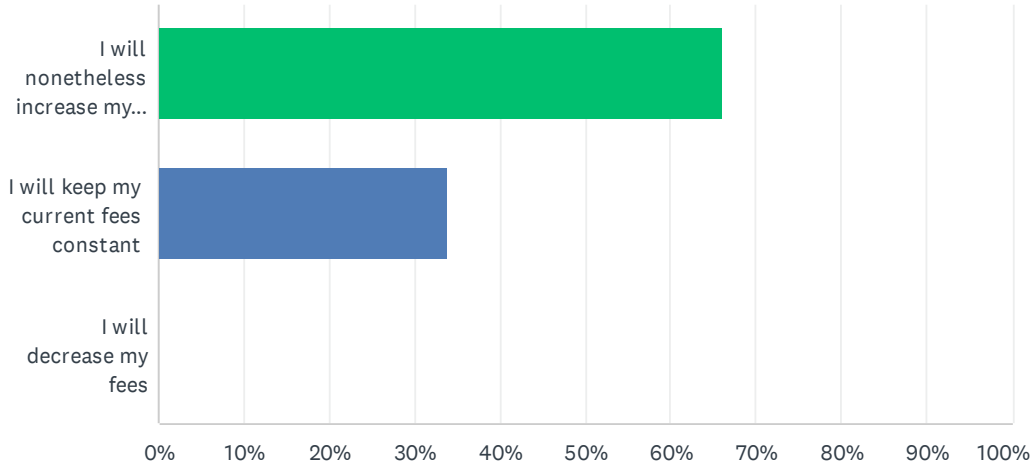
Answered: 248 Skipped: 56



ANSWER CHOICES	RESPONSES
I charge substantially more	6.85% 17
I charge slightly above	27.42% 68
I charge at roughly equal	59.68% 148
I charge slightly lower	3.63% 9
I charge substantially lower	2.42% 6
TOTAL	248

Q28 If the medical aid funds (through their association NAMAF) again decide not to increase tariffs for 2025, which statement describes your intention the best?

Answered: 248 Skipped: 56



ANSWER CHOICES	RESPONSES	
I will nonetheless increase my fees	66.13%	164
I will keep my current fees constant	33.87%	84
I will decrease my fees	0.00%	0
TOTAL		248