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Private Practice Review May 2026

HealthMan
EXPERT SOLUTIONS FOR PRIVATE PRACTICE SUCCESS
30 YRS Anniversary
PRIVATE PRACTICE REVIEW

Content

Food for Thought
Breaking News
Update on NHI News
News from Government
Financial News
Pharmaceutical News
General News
News from Medical Schemes
HealthMan Diary
CMS Circulars
Special Notes

Honouring Red Cross War Memorial Children's Hospital – 70 years of saving children's lives
1956 2026

Childrens' Hospital celebrates 70

"The first tertiary hospital in sub-Saharan Africa dedicated entirely to child healthcare, the **Red Cross War Memorial Childrens' Hospital** in Cape Town, celebrated 70 years of caring by launching a R70m fundraising event.

FOOD FOR THOUGHT

Research shows that AI tools outperform doctors

The latest SA research into Artificial Inteliggence (AI) in healthcare, led by Prof Bruce Bassett of AI at Wits University, found that AI now surpasses human doctors in hospital ward diagnoses.
- ***Business Day*** (7 May 2026)

The study at Chris Hani Baragwanath Academic Hospital suggests that AI Diagnostic Tools could soon become essential for reducing the workloads of overstretched healthcare staff.
In the study expert doctors were asked to scrutinise 300 sets of in-patient files containing complex data including X-rays, MRI scans, laboratory results and vital signs like blood pressure.
According to the results OpenAI's GPT-5.1 achieved the highest scores and Claude 4.1 Opus performed the weakest among the machines.
"Every model tested consistently outdid the ward diagnoses made by the hospital staff."
A recent US study, published in the journal ***Science****,* confirmed the SA study's results.
"While free chatbots often provide unreliable health advice, these commercially available systems proved remarkably dependable."

NHI financial framework under growing scrutiny

SA's National Health Insurance (NHI) financial framework is under growing scrutiny amid constitutional challenges and limited Budget 2026 allocations.
Government has delayed implementation of the NHI Act pending the Constitutional Court's ruling on several challenges.
(On 6 May the ConCourt reserved judgment in both the BHF's and Western Province's cases.)
Meanwhile, analysts warn the policy promises universal coverage without fully developed operational systems. About R9.3bn has been earmarked over the medium term, but this falls short of the funding required for a full single-payer model. National Treasury has also retained medical scheme tax credits, signalling caution and a desire to protect private healthcare affordability.
The debate centres on how the NHI design will affect long-term private investment in hospitals, specialists and medical technology.
If reimbursement tariffs fail to reflect real costs, investment and innovation could decline, weakening access to advanced care.
Hybrid funding models, including phased transitions and shared-risk mechanisms, are emerging as practical alternatives to balance universal access with sustainable private sector participation. – ***Business Day (***4 May 2026)

UPDATE ON NHI NEWS

BHF CHALLENGES NHI ACT

B·H·F SOUTHERN AFRICA www.bhfglobal.com

Day 1

Focus on NHI funding, transparency in ConCourt

5 May marked the first day of a 3-day hearing in the Constitutional Court (ConCourt) during which the Board of Healthcare Funders (BHF) and the Western Cape Government requested the Court to set the NHI Act aside on procedural grounds, arguing that the public participation process was defective. - ***Business Day*** (6 May 2026)
The BHF's case listed the Speaker of the National Assembly, President Cyril Ramaphosa and Health Minister Dr Aaron Motsoaledi as respondents.
Bruce Leech, appearing for the BHF, said lawmakers did not know the true costs of implementing NHI, nor did they have enough detail on what benefits NHI would include.
He stressed that the BHF is not challenging the substance of the Act's provisions.
Instead, the application targets the process that preceded the President's signing the Act into law.
Ngwako Maenetje, representing Parliament, argued that the public was given sufficient information to participate. He said it was not possible to estimate the true costs with precision because NHI could take up to 10 years to implement and would depend on shifting economic conditions.

If the applicants succeed, the Court could set aside the NHI Act and direct Parliament to remedy the shortcomings in public participation.
If the application fails, several organisations whose legal actions were paused pending the outcome, are expected to proceed.

Day 2

ConCourt hears there was 'overwhelming support'

On 6 May the NHI Act faced renewed scrutiny in Court; focusing on whether Parliament's public participation process met constitutional standards, reported ***Daily Maverick*** *(6 May 2026).*
Western Cape Premier, Alan Winde, claimed that the National Council of Provinces (NCOP) rushed key hearings in Gauteng and the Western Cape, leaving "meaningful engagement" impossible.
Advocate Geoff Budlender SC, said the timetable for public participation was too rigid and should not have overridden people's rights to be heard.
According to Winde's papers, Gauteng's public participation reports were not submitted to the select committee at all.
The Western Cape's report was allegedly provided only after decisive stages had passed. Budlender argued that even where reports were available, they were not meaningfully engaged with.
According to Ngwako Maenetje SC, Parliament spent R14m on public participation. He claimed that there was "overwhelming support" for the legislation.

At the end of the day's hearing Acting Justice Narandran Kollapen reserved judgment in both the BHF and Western Province cases on procedural grounds.

More court cases pending:

NHI challenges:

- **Solidarity:** challenging the rationality and constitutionality of the Act.
- **Hospital Association of South Africa (HASA):** representing private hospitals, arguing the NHI is unaffordable and unreasonable.
- **South African Private Practitioners Forum (SAPPF):** challenging the Act based on its effect on private practices, arguing it violates rights to freedom of trade and access to quality healthcare.
- **Health Funders Association (HFA):** challenging key aspects of the Act, stating it is unworkable.
- **Sakeliga & AfriForum:** added pressure against the implementation of the Bill.

US & UK healtcare models in a nutshell

The proposed NHI most closely resembles the tax-funded, single-payer model of the United Kingdom's National Health Service (NHS). It has achieved universal coverage and strong financial protection. Yet it also reveals the limits of centralisation when resources, and particularly management capacity, falls short.
The United States demonstrates the opposite extreme: a largely market-driven system with world-class innovation and speed only for those who can afford it; but profound, deep-seated inequality and the highest costs globally.
The strongest-performing systems across Europe and parts of Asia blend public guarantees with private delivery, competition with regulation and universality with fiscal discipline.
The evidence is best understood when comparing the different models adopted by various nations. - ***IOL*** (8 May 2026)
To read more on models adopted by various nations, click on the button below:

READ MORE

NEWS FROM GOVERNMENT

Medical negligence claims drop, but billions still at stake

MEDICAL NEGLIGENCE CLAIMS IN SA
MEDICAL NEGLIGENCE CLAIM

Medical negligence payouts by provincial health departments have declined in recent years from R1.8bn in 2019/20 to R1.1bn in 2024/25.

This is largely due to the State's more aggressive approach to contesting and settling claims.
However, the overall burden remains severe, with contingent liabilities reaching R62bn; over 20% of the public health budget. Most claims stem from obstetric injuries, particularly cerebral palsy cases, alongside trauma and orthopaedic incidents. Lengthy legal processes and high costs strain resources, often diverting funds from frontline healthcare services.
A proposed "voucher system," allowing ongoing care instead of lump-sum payouts, was rejected by the Supreme Court of Appeal, which upheld the "one-for-all" rule requiring full compensation upfront. While experts stress the need for reform to ease financial pressure, the Court ruled that any changes must come from the legislature, leaving the current system in place. – ***GroundUp*** (29 April)

Fines for practitioners found guilty of improper conduct

DOCTORS FINED FOR IMPROPER CONDUCT
MEDICAL DISCIPLINARY BOARD
FINED
$25,000
PROFESSIONAL MISCONDUCT

The Minister of Health, Dr Aaron Motsoaledi, has published regulations relating to fines for practitioners found guilty of improper or disgraceful conduct.

The regulations were published under Section 42(1) (d) of the Health Professions Act 1974 (Act No. 56 of 1974).
Fines will be imposed by a preliminary committee of enquiry and professional conduct committee.

Also read attached document

FINANCIAL NEWS

Dis-Chem and Clicks 'bridge the gap'

On 13 May ***Times Live*** wrote in its editorial column that "a significant retail healthcare expansion is quietly transforming how citizens access daily medical support".
"Private retailers like Dis-Chem and Clicks are building accessible primary healthcare services. These outlets help bridge the gap between expensive private care and an overstretched public system.
"Retailers are now positioning themselves as more than just pharmacies. They provide screenings, chronic disease management and reproductive health services. This retail healthcare expansion offers a straightforward appeal: it is convenient, affordable, and accessible."

Job fears due to Dis-Chem's corporate 'overhaul'

Dis-Chem plans to cut several hundred of its 2 200 jobs while a major restructuring plan is on the cards. However, the group said it will open up new positions.
- MedicalBrief (29 April 2026)

Dis-Chem PHARMACIES Pharmacists who care

Dis-Chem to expand into healthcare delivery

More than 500 head office workers had been invited to join a mandatory consultation phase dictated by the Labour Relations Act for companies contemplating operation structurig - Dis-Chem Pharmacies announced that it is expanding into integrated healthcare delivery through its new Health Hub mode, reported ***Business Day*** (8 May 2026).
The concept combines clinics, pharmacies, telemedicine, diagnostic testing, digital prescriptions and healthcare funding services in one location.
According to CEO Rui Morais Health Hub will reduce healthcare costs, simplify patient journeys and improve access to healthcare.
The group already operates more than 540 clinics staffed by 535 nurses; delivering over 1.2m consultations in the 2025 financial year.
Telemedicine and electronic prescription systems are now available across all clinics.

Biovac's fund raising reaches R2.4bn

SA vaccine manufacturer Biovac has secured a further R327m from two French development finance institutions (Agence Française de Développement and its private-sector arm Proparco), bringing its total fundraising to R2.4bn and leaving the company within striking distance of its R2.95bn target, reported ***Business Day*** (12 May 2026).

Biovac

Biovac's priority will be an oral cholera vaccine plant, designed to produce between 30m and 40mdoses per year.

PHARMACEUTICAL NEWS

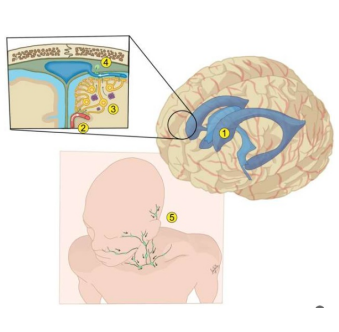
Aspen to launch first locally made human insulin

On 5 May the SA Health Products Regulatory Authority (SAPHRA) approved Aspen Pharmacare's local manufacturing of the first human insulin batches.
The sterile insulin, manufactured in Gqeberha, Eastern Cape, may now be sold in SA and other African markets.
– ***Moneyweb*** *(7 May 2026)*

"After Aspen's SENS update on 5 May the company's share price reached a 52-week high,
llifting its market capitalisation above R66bn."
Diabetes is now "the single biggest killer in the country" among non-communicable diseases.

GENERAL NEWS

SA surgeon performs Africa's first lymphatic bypass for Alzheimer's



Credit: *Plastic & Reconstructive Surgery*

A Pretoria-based surgeon, Dr Ben Moodie, performed Africa's first experimental lymphovenous bypass on a patient with advanced Alzheimer's disease, reporting early but unproven signs of improvement.

– ***MedicalBrief*** (29 April 2026)

"Conducted at Cintocare Hospital, the four-and-a-half-hour procedure aimed to enhance lymphatic drainage from the brain; based on emerging theories linking Alzheimer's to impaired waste clearance."
The patient, a 70-year-old man, showed improved alertness, communication and recognition of family shortly after surgery.
The procedure, developed internationally and refined in Asia, has drawn mixed reactions particularly from neurologists cautious of non-traditional interventions.
While the case highlights innovative exploration in a field with limited treatment options, experts emphasise that clinical evidence is still needed before broader adoption or conclusions about effectiveness can be made.

'SA experts baffled by drop in teen pregnancies

WHY THE DROP?
TEEN PREGNANCIES SOUTH AFRICA SIGNIFICANT DROP

A new study, published in the ***SA Medical Journal*** has revealed a surprising decline in teenage pregnancies across SA, reversing years of rising birth rates among girls aged 10 to 19,
reported ***MedicalBrief*** (6 May 2026)

Public health researcher Peter Barron said the findings initially raised doubts because the decreases were so dramatic and consistent nationwide.
Between April 2021 and March 2025, teenage births dropped by 16%, while births among girls aged 10 to 14 fell by nearly 40%. Researchers could not identify a clear cause.
Despite the improvement, SA's adolescent pregnancy rate remains far higher than that of high-income countries.
Experts warn that teenage pregnancy still affects education, poverty, gender-based violence and long-term social outcomes, although declining birth rates may ease future pressure on resources and public services.

NEWS FROM MEDICAL SCHEMES

Scheme increases have outpaced inflation, warns Reserve Bank

South African Reserve Bank

The Reserve Bank sounded the alarm over persistent health insurance price increases which have outpaced inflation for much of the past decade.

This was attributed to overutilisation, market inefficiencies, inadequate oversight and weak competition in SA's private healthcare industry**.**
In its latest ***Monetary Policy Review*** the bank noted that SA has only three hospital groups accounting for about 90% of admissions and three administrators covering nearly 80% of all beneficiaries. From 2014 to 2024 intensive care unit admissions increased by 32.5% and high care admissions by 27.8%,. Meanwhile, medical scheme beneficiaries grew by only 4%.
While inflation for medicines, medical products and services broadly tracked headline inflation, the Reserve Bank said medical scheme premiums have escalated at a rate well above this. Another major reason for above-inflation medical premium increases is market inefficiencies compounding costs, diluting cost containment and enabling fraud and abuse,
according to the report. – ***Daily Maverick*** (1 May 2026)

GEMS cuts tariff increase to 7.5%

The Government Employees Medical Scheme (GEMS), one of SA's biggest restricted medical schemes with 890,000 principal members and around 2.4m beneficiaries, announced a cut in 2026 tariffs lowering it to 7.5% effective 1 July.
GEMS previously announced an average increase of 9.8% from 1 January 2026, then reduced this to 9.5% from 1 February 2026. GEMS said the decision followed a structured review by its Board of Trustees and engagement with Government and organised labour.
- ***Times Live*** (7 May 2026)

Military pensioners' scheme faces collapse

The Democratic Alliance (DA) called for urgent intervention to prevent the collapse of the SA Military Health Service Regular Force Medical Continuation Fund, which supports healthcare for about 36 000 military veterans and pensioners, reported ***MedicalBrief*** (6 May 2026).
Defence Minister Angie Motshekga confirmed the fund is only 3.5% funded, faces a monthly shortfall of R40m and has accumulated a R2.4bn deficit.

The fund has reportedly been disinvesting assets since 2023 to meet expenses.
The DA warned that thousands risk losing healthcare cover as the fund nears insolvency.
National Treasury declined recapitalisation requests, instead proposing policy reforms.

HEALTHMAN DIARY

23 May:
CMS Industry Indaba
Policy Direction and Regulatory Expectations for Section 59 Reform
Sandton Convention Centre

4 - 5 June:
Psycsicians Conference
Stellenbosch

6 - 7 June:
SAPPF Conference
Melrose Arch
Essential Ingredients for Private Practice

10 June:
RFS Webinar

19 - 20 June:
InStopp Paediatric Workshop

24 June:
HM/GEMS meeting

5 - 8 July:
BHF Conference

6 July:
Med Chronical: CPD accredited webinar on Skin Barrier first: The foundation of atopic dermatitis

22 July:
RFS Webinar

20 August:
SASOP/PsychMG:
Roadshow North West

29 - 30 August
Surgicom Congress: Peril, Power and Possibility – Looking Forward to 2030, Your Five-Year Plan

17 September:
SASOP/PsychMg
Roadshow Durban

2-4 October:
ENT Conference – Lord Charles Hotel
Somerset Wes

21 October:
SASOP/PsychMg
Roadshow Gqeberha

22 October
SASOP/PsychMg
Roadshow East London

23-25 October:
PMG Congress - Irene Country Hotel

9 - 11 November:
Annual AGMHI Congress
Mombasa Kenya
Youth Mental Health in Africa & Diaspora

CMS CIRCULARS

CMS COUNCIL FOR MEDICAL SCHEMES

CMS Circulars
published in May 2026

No new Circulars released since 16 April 2026

SPECIAL NOTES

Selling your practice?

HealthMan has been doing valuations of medical practices for sale for many years. We can do a full financial report on the value of your practice if you consider selling it to an interested buyer.
We will also provide you with a draft sales contract.
Contact us for valuation of your practice and assistance, even if you are not yet in the process of selling.
For more information contact:
Steve Roos at steve@healthman.co.za or
Casper Venter at casperv@healthman.co.za.

Practice for sale

Dr JH Snyman (surgeon) is selling his practice in Vanderbijlpark.
For more info, contact:
Mrs S Snyman (practice manager)
Tel: +27 16 950 8042

Consulting Rooms Available: Alberton

Upmarket consulting room available for a healthcare professional. Would suit GP, aesthetic doctors, physiotherapists, speech therapists, OT, psychologists, psychiatrists, dermatologist, etc

- Sessional (furnished) or full-time (unfurnished) options from January 2026.
- Secure and adequate parking.
- Includes WIFI and cleaning.
- Access to shared reception area and kitchenette.

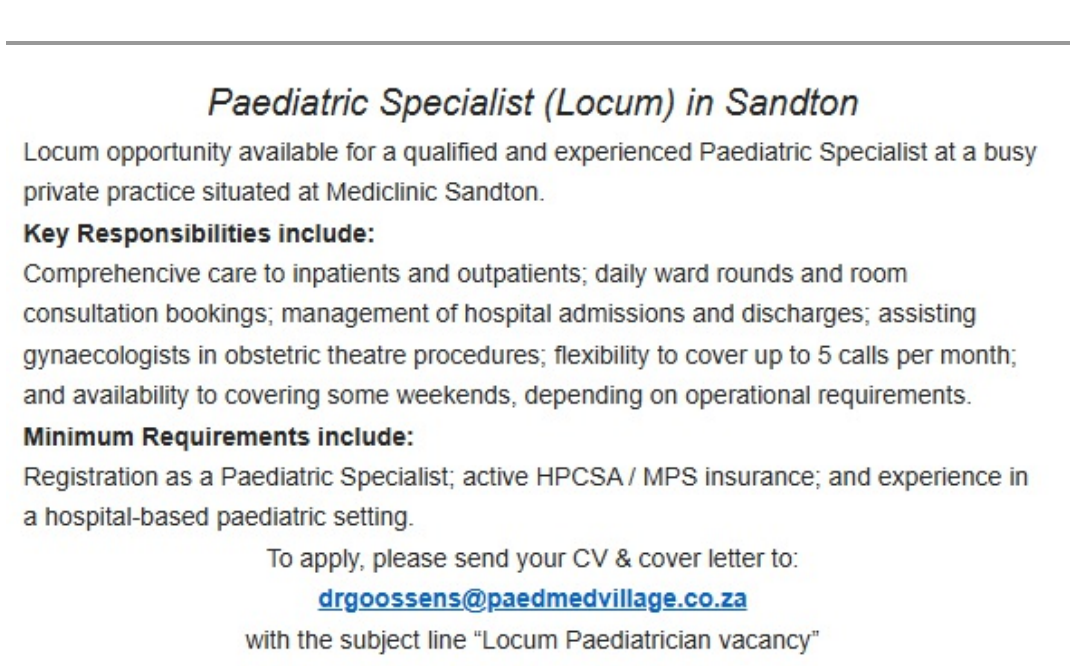
For more information:
· 079 203 0437
· hello@nutritionalsolutions.co.za

Locum Neurologist: Mediclinic Vergelegen, Somerset West

A busy private neurology practice has capacity for a locum neurologist. The practice manages a wide spectrum of neurological conditions and offers an established referral base, supportive working environment and flexible working arrangements.
Requirements:
Specialist registration in Neurology (HPCSA and FC Neurol) and relevant clinical experience.
Practice details:
Dr Heena Narotam Jeena, Suite 215, Second floor, Block 1, Mediclinic Vergelegen, 70 Main Road, Somerset West, 7130.
Contact:
Heena (+27 83 637 9659; reception@drnarotamjeena.co.za for more information).

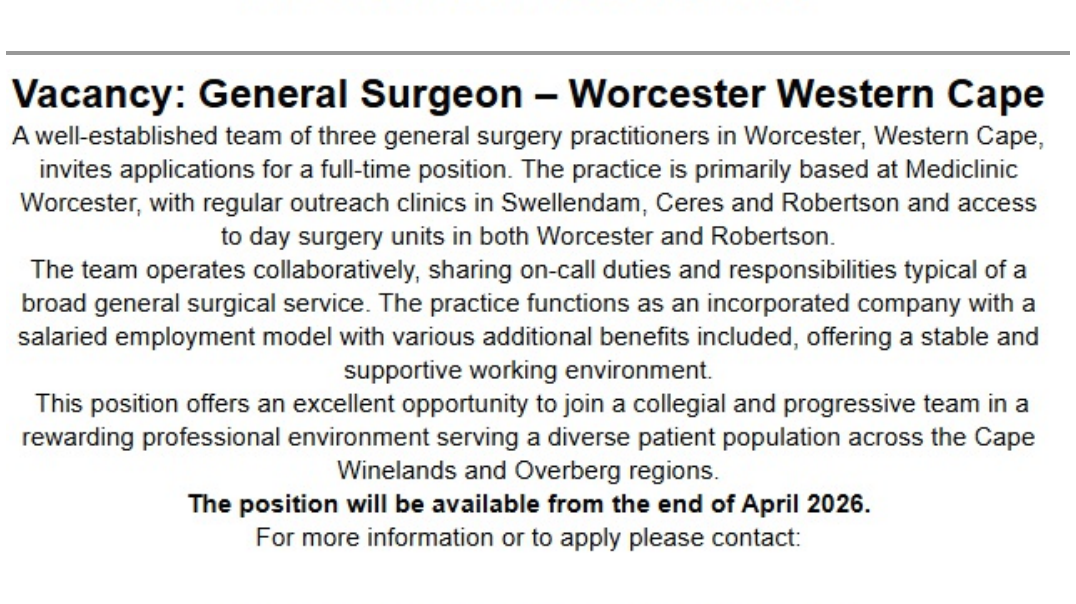
Vacancy for Psychiatrist in Durban Hospital

Permanent Position available at Hospital in Durban
Both full-day and half-day positions are available
Candidates need to be qualified as a specialist psychiatrist and registered with HPCSA
For more info:
Contact Adrian Veeran
at: adrian@cands.co.za
or: 031 7017388



Paediatric Specialist (Locum) in Sandton

Locum opportunity available for a qualified and experienced Paediatric Specialist at a busy private practice situated at Mediclinic Sandton.
Key Responsibilities include:
Comprehencive care to inpatients and outpatients; daily ward rounds and room consultation bookings; management of hospital admissions and discharges; assisting gynaecologists in obstetric theatre procedures; flexibility to cover up to 5 calls per month; and availability to covering some weekends, depending on operational requirements.
Minimum Requirements include:
Registration as a Paediatric Specialist; active HPCSA / MPS insurance; and experience in a hospital-based paediatric setting.
To apply, please send your CV & cover letter to:
drgoossens@paedmedvillage.co.za
with the subject line "Locum Paediatrician vacancy"



Vacancy: General Surgeon – Worcester Western Cape

A well-established team of three general surgery practitioners in Worcester, Western Cape, invites applications for a full-time position. The practice is primarily based at Mediclinic Worcester, with regular outreach clinics in Swellendam, Ceres and Robertson and access to day surgery units in both Worcester and Robertson.
The team operates collaboratively, sharing on-call duties and responsibilities typical of a broad general surgical service. The practice functions as an incorporated company with a salaried employment model with various additional benefits included, offering a stable and supportive working environment.
This position offers an excellent opportunity to join a collegial and progressive team in a rewarding professional environment serving a diverse patient population across the Cape Winelands and Overberg regions.
The position will be available from the end of April 2026.
For more information or to apply please contact:

Dr Arnold Smith or Dr Jacques Botha: 023 342 7053.

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