

Dear Madame President and Councilors, members and Secretariat,

As the largest business unit in SASA, the Private Practice Business Unit (PPBU) continues to exercise its mandate to work for the improvement of conditions of members in the Private Sector. We do not believe that we limit ourselves to the private sector and are active in a number of areas which are relevant to the professional needs of all members.

The past year has been a challenging year for the PPBU. We have been active in a number of forums, have run a successful workshop, had a failed workshop (more to follow) and are actively preparing for the workshop to be held the day following the delivery of this report.

The Healthcare Environment

The SASA PPBU finds itself active in a number of important forums relating to the current and future landscape of anaesthesia and private healthcare. We are represented on the following:

1. The South African Concerned Healthcare Practitioners forum

This is a loose grouping comprised of a number of specialist groups, allied medical practitioners and general practitioners – representing thousands of clinicians. The group's primary goal was to interrogate and provide critical thought around the passing of the National Health Insurance (NHI) Bill. Through collective effort, a petition was drawn up and delivered to the President requesting that he not sign the NHI Bill and rather refer it for further constitutional scrutiny.

Additionally, the group aims to collaborate on other challenges facing medical care in the country including the lack of training posts, requirement for MMeds, loss of accreditation of teaching hospitals and departments. Unfortunately, given that the group is a 'wide church', there are some sticking points and some careful negotiation between the various groups may be required. We maintain a listening watch but since we represent the largest group of specialists, we are seen as an important collaborator in this group.

2. Coding Forums

We as the Society and the PPBU recognize that there will be a change in the coding framework in the future occasioned by the unwillingness of the Dept of Health to pay the exorbitant licensing fees for the AMA's CPT coding framework. PPBU members have been attending coding meetings regularly throughout the year. Currently, there is a proposal for a new framework called the South African Classification of HealthCare Interventions (SACHI) which will be based on the WHO's International Classification of Healthcare Interventions (ICHI).

There is a proposal to create a non profit organization which will develop and administer this coding system. There are some concerns re the governance of this and the PPBU continues to engage pro-actively in this area

3. Changes in the HPCSA Ethical rules

Despite a long and coherent submission to the HPCSA regarding their proposed changes to ethical rules around the employment of doctors, the Council went ahead and published their proposed changes with no modifications or consultation with the affected practitioners.

This has, understandably, caused a fair amount of disruption in the private health care space with lots of entities maneuvering to potentially be employers of doctors. The PPBU has created a subcommittee which is investigating the options available to us and we are engaging with labour lawyers with expertise in the healthcare sector. This is an active space and there are as yet no deliverables from this committee.

Stakeholder Engagement

The PPBU has had a number of productive engagements with stakeholders in the last quarter. We met with Discovery and continue to engage with them regarding fixed fee products, coding and payment queries and governance projects. It is important to appreciate that without input from the society, there are deficiencies in the understanding of anaesthesia practice from the point of view of the medical funders – thus we continue to provide valuable insight to them.

We also met with Momentum regarding their practice of paying patients directly rather than paying the practitioners who submit the accounts. While it was a productive meeting, we are at an impasse and await a further meeting with them in April.

Workshops and Education Activities

The PPBU held an extremely successful private practice workshop in July last year in Johannesburg. It was encouraging to see a very young and diverse audience attend and this bodes well for the future of private practice anaesthesia in South Africa. We definitely see a correlation between the number of workshops held and the queries which come through, and we regard workshops as a critical part of our mandate in the PPBU.

Unfortunately, it was necessary to delay the planned workshop in Cape Town in November/December. The reasons for this have been discussed at length but ultimately reflect a failure to attract a suitably diverse speaker panel. It was felt that given the Society's stated goals and policies it was not appropriate to continue the planned workshop with the given speaker panel.

While it is disappointing that the workshop was delayed, it did provide the impetus to have further discussions on the construction of speaker panels going forward. We have a planned workshop for the 7th of April (the day after this report delivered). The speaker panel is approved by the TIDE unit and we are extremely excited to bring PPBU workshops back to Cape Town for the first in person workshop there since COVID.

In addition, we have an exciting workshop and series of lectures planned for the All Africa Anaesthetic Congress/SASA congress in Johannesburg in September. We will also be planning a further workshop in another venue during the course of the year.

Queries and Member Support

We continue to run our queries using a core of members of the PPBU committee who discuss the incoming queries in a confidential manner and provide feedback to members, their patients and other parties who raise queries. This is a core business activity of the Unit and will continue as long as there are queries. We do note that many of the queries relate to coding – and our very comprehensive coding guideline can answer many of the questions.

2024 and Beyond

This AGM marks the end of the tenure of Drs Blackburn and Ryan as co-convenors of the SASA PPBU. We are very excited to be welcoming Drs Andrea Jacobs and Stephan Erwee as co-conveyors. They are experienced members of the Unit and will bring a new and exciting energy to the Unit going forward.

We are in the process of restructuring the unit into various subunits. This is in order to streamline the work of the unit, to more fairly distribute the workload and to limit the risk of convenor burnout. Further reports on this process will follow at later council meetings.

The PPBU thanks the Council and the secretariat for their ongoing [support](#).