

COMPLAINT ABOUT THE DISTRACTIVE NATURE OF THE MEDICAL SCHEMES IN THE MEDICAL HEALTH SYSTEM

East London

August 2018

My name is Nkosohlanga Mboniswa, male, Black African, a South African by birth, my ID # XXXXXXXXX, I reside in East London, at XXXXXXX. I have 2 children aged 12 and 10 years and my wife works for the South African Social Security Agency (My children are in here medical aid). I have been diabetic for 22 years and I am insulin dependent therefore I am on chronic medication. I have over 18 years work experience and during all that time I had never have a subsidised medical aid as I had never been employed permanent (Fixed term contracts), so I had always paid 100 % for my own medical aid and pension contribution, I have been a member of Bonitas Medical Aid Scheme since 2004, my membership number is XXXXXXX.

Due to this issue I have never been in a position to include my parents onto my medical aid until 2016, and as a matter of conviction I am convinced that my father died due to poor health care service in the public health system. We are from Lady Frere, therefore for specialist medical care my father like many others have to wait for appointments from the specialist from the Frere Hospital in East London which is 230kms, this meant old and frail patients are picked up at bus stops in early morning hours and be transported in hospital buses to East London.

When my father died in 2014 due to poor health service from the public health care system I decided immediately that I must include my mother in my medical aid. My mother (she also has a chronic condition-Asthma) was born in 1946, she is a qualified teacher by profession but never worked due to many difficulties of the time including not having work permit which would have allowed her to work and teach in Cape Town (She was considered an illegal immigrant in the RSA and here remaining in the Transkei would have ended her marriage to my father). Both were self-employed and were simply not allowed to have medical aids (and their businesses were thriving and would have easily afforded medical aid) From August 2014 to June 2016 she on my sister's medical aid which was subsidized by her employer, but her work situation changed dramatically which then required that I must put her (My mother) on my medical aid from June 2016 to-date.

My biggest issue is the financial extortion described as Late Joiner Fee, this is pure robbery in practical terms I end up paying R 2 123.25 on a monthly basis as a late joiner fee in perpetuity, when I quarried thus I was told that it is in the rule, there is no dispute about that, however it doesn't not make it just, this is further punishment to many of us as Black South African who can afford to provide better health care cover for our parents but are extorted more money by the medical aid schemes on the basis that it is in the rules of the medical Aid scheme. I raised objection on this but because I wanted to have access to better medical care I allowed it to go ahead, I consider this a criminal apartheid payment.

My monthly contributions are as follows:

- Mr Nkosohlanga Rhodes Mboniswa-Main Member with a chronic condition - R XXXXXX
- Mrs Nobubele Beauty Mboniswa (My mother-with a chronic condition)-dependant- R XXXXXX
- Late joiner fee - (Criminal unjust apartheid penalty fee) - R XXXXXX
- **Total** R XXXXXX

This is wholly unjust, the fact that the rules of the medical scheme talk about this rule does not make is just, fair and legal, all what it does it excludes many parents who never worked whose children can now afford to include them in their medical aids, this is a lifelong penalty that punishes us for being black and previously oppressed and being excluded, this late joiner fee continues on the exclusion path of the past. I want to pay for a good service but I must not be extorted money.