IN THE APPEALS COMMITTEE OF THE COUNCIL FOR MEDICAL SCHEMES

Held *via* Microsoft Teams video and audio conferencing technology

REFERENCE: CMS 77486

In the appeal between:

B **APPELLANT**

and

Discovery Health Medical Scheme **RESPONDENT**

DATE OF HEARING:

16 NOVEMBER 2022

DATE OF RULING:

8 February 2023

RULING AND REASONS

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1. The Appellant is Mr B (the Appellant or Mr B), a member of the Respondent Medical Scheme. Mr B did not attend the hearing.

2. The Respondent is Discovery Health Medical Scheme (the Appellant or the Scheme), a medical scheme registered and regulated under the Medical Schemes Act 131 of 1998. Mr Y Dhorat appeared virtually on behalf of the Scheme.

3. The Complainant is aggrieved by the manner in which the Scheme processed payment for his COVID-19 emergency treatment. He complained that the disputed account remains short-paid. The member claims payment R606 outstanding on this claim.

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4. The Scheme undertook to pay the R606.15 short payment as communicated to Mr B in its response dated 30 April 2021. According to the Scheme, the R606.15 on Dr H's account have since been paid.

5. On 11 November 2021 the Registrar ruled that -

   5.1. "*The matter is considered resolved, to the extent that the disputed shortfall has been paid."* and

   5.2. "*Regarding allegations of deliberate failure to comply with the Act, we find that the evidence does not support an intentional violation of the Act.* "

6. The Appellant appealed the Registrar's ruling. The Appellant detailed his appeal from page 38 to 53 of the paginated bundle.

7. The Appellant summarised his appeal issues on page 52 of the paginated bundle, as follows, namely, that the matters placed before the CMS regarding dispute resolution within DHMS, has not been properly investigated due to CMS's strong bias in favour of DHMS.

8. This appeal turns predominantly on the issues of the Scheme's Dispute Resolution Mechanisms, and the CMS' alleged bias in favour of the Scheme, than the issue of the short-payment of Dr H's account.

9. The Appellant did not make additional submission to what appeared from his papers.

10. At the hearing of the Appeal, the Scheme raised a preliminary issue, namely, that there is no appealable issue before the Appeals Committee because the Scheme paid the shortfall of Dr H's account.

11. Regarding the additional matters raised by the Appellant, the Respondent submitted that those complaints are against the Registrar, not the Scheme.

12. On the merits of the appeal, the Scheme submitted that it made the short payment the Appellant complained about. The payment was delayed due to an administrative error payment.

13. The Appeals Committee considered the papers filed in this matter and the parties' various submissions.

14. The Appeals Committee finds that indeed, insofar as the short payment of Dr. H's account is concerned, there is no appealable issue. The short payment had been addressed by the Scheme.

15. On the additional issue regarding the alleged strong bias of the CMS in favour of the Scheme, the Registrar is not a party to this appeal –

    15.1. To answer to these allegations

    15.2. For the Appeals Committee to competently make any order against the Registrar.

ORDER

16. The Appeals Committee dismisses the Appellant's appeal.

Dated on the 8th day of February 2022.

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Ms D Terblanche

Member Appeals Committee Hearing Panel

With Mr. M Maimane (Presiding member), Dr H Mukhari (Member), and Dr X Ngobese (Member), concurring it is so ordered.