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Dear Members

Bonitas Tender Dispute Returns to the Regulator as Court Application is Withdrawn

The legal dispute between Medscheme and Bonitas Medical Fund has taken a significant turn, with Medscheme withdrawing its court application against the medical scheme. The decision removes the legal obstacle that had delayed the Council for Medical Schemes (CMS) from proceeding with its planned forensic investigation into allegations surrounding procurement and tender processes at Bonitas.

The matter centres on allegations made by Medscheme regarding the awarding of contracts relating to the administration and managed care of Bonitas' BonCap option, as well as a separate marketing and sales distribution contract. Medscheme has alleged that certain contracts were awarded to organisations that lacked the necessary experience, operational capacity and compliance credentials.

It is important to note that these allegations have **not been tested in court**, and **no findings of wrongdoing have been made** against Bonitas, Private Health Administrators (PHA), or any other party involved.

What Happens Next?

With the court proceedings no longer standing in the way, the focus now shifts back to the **Council for Medical Schemes**, which intends conducting a forensic investigation into the procurement processes in question.

The CMS previously indicated that its preliminary review found sufficient grounds to justify a more detailed investigation. However, the regulator has also emphasised that launching a forensic investigation should not be interpreted as a finding of misconduct or as an indication of the eventual outcome.

The investigation will seek to determine whether procurement processes complied with the requirements of good governance, fairness and regulatory standards.

Background to the Dispute

Despite the ongoing legal challenge, Bonitas proceeded with the implementation of its new service arrangements from **1 June 2026**, appointing **Momentum Health** as its administrator and **Private Health Administrators (PHA)** to provide managed care services.

Bonitas has consistently rejected Medscheme's allegations, maintaining that the contracts followed appropriate procurement processes and that the organisations appointed possess the necessary capabilities and regulatory accreditation.

The medical scheme has also argued that Medscheme's legal action was largely commercial in nature, given that Medscheme had previously provided services to Bonitas. Medscheme has denied that its application was motivated by commercial interests.

Why This Matters

While the dispute involves specific service providers, it raises broader governance issues that are relevant across the healthcare sector.

Medical schemes manage billions of rand in members' contributions each year, making transparent procurement processes, sound governance and effective regulatory oversight essential to maintaining public confidence.

The outcome of the CMS forensic investigation may provide valuable guidance on governance expectations for medical schemes and other healthcare organisations involved in significant procurement decisions.

Relevance for Dental Professionals

Although the dispute does not directly affect dental practitioners, many SADA members provide care to patients covered by Bonitas and other medical schemes. Stable governance within medical schemes contributes to confidence in the funding environment and supports the efficient administration of healthcare benefits.

SADA will continue to monitor developments as the CMS investigation progresses. Until the regulator concludes its work, the allegations remain unproven, and all parties are entitled to the presumption of fairness while the investigation follows its course.

Generic Weight-Loss Medicines Arrive in South Africa: What Every Dentist Should Know

South Africa is entering a new chapter in the management of obesity and type 2 diabetes. Following the expiry of patent protection for semaglutide, the active ingredient in medicines such as Ozempic® and Wegovy®, the South African Health Products Regulatory Authority (SAHPRA) has begun approving generic versions of these medicines.

As competition enters the market, treatment is expected to become more affordable and accessible to many more South Africans. While this is positive news for patients, it also has important implications for dental practitioners.

Why Should Dentists Care?

Although dentists are not usually the prescribers of these medications, many patients attending dental practices will increasingly be using GLP-1 receptor agonists such as semaglutide for diabetes management or weight loss.

These medicines are changing the medical profile of many patients, making it more important than ever for dental teams to obtain comprehensive medical histories and

understand the potential implications for dental treatment.

Oral Health and Obesity Are Closely Connected

Obesity is far more than a lifestyle issue—it is a chronic disease associated with diabetes, cardiovascular disease, hypertension and other systemic conditions that also influence oral health.

Growing evidence suggests that obesity, insulin resistance and periodontal disease are linked through chronic inflammation. As patients achieve better metabolic control and sustainable weight loss, improvements in their overall health may also support better periodontal outcomes.

This reinforces the increasingly recognised relationship between oral health and general health.

Clinical Considerations in Dental Practice

As more patients begin using semaglutide and similar medicines, dentists should be aware of several important considerations:

- **Delayed gastric emptying:** These medicines slow stomach emptying, which may increase aspiration risk for patients undergoing procedures involving conscious sedation or general anaesthesia. Appropriate communication with the patient's treating medical practitioner or anaesthetist remains essential.
- **Gastrointestinal side effects:** Nausea and vomiting are common, particularly when treatment is initiated or doses are increased. Flexible appointment scheduling may improve patient comfort.
- **Dry mouth and dehydration:** Reduced food and fluid intake may contribute to xerostomia, increasing the risk of dental caries, mucosal irritation and opportunistic infections. Preventive oral healthcare becomes even more important.

Don't Forget the Medical History

With the growing use of weight-loss medications, every dental practice should routinely ask patients whether they are using:

- Weight-loss injections or medications
- Injectable diabetes treatments
- Newly prescribed medicines
- Any medication-related side effects
- Medicines that may affect sedation or planned surgical procedures
-

Patients may not always consider weight-loss medicines relevant to their dental treatment unless specifically asked.

Beware of Counterfeit Medicines

The popularity of semaglutide has unfortunately fuelled a global market for counterfeit and illegally supplied products, many of which are sold through social media platforms and unauthorised online suppliers.

These products may contain incorrect dosages, contaminants or entirely different substances, posing significant health risks.

SAHPRA has announced a national public awareness campaign to educate consumers about the dangers of purchasing medicines from unregulated sources while strengthening efforts to combat counterfeit pharmaceuticals.

Dental practitioners who suspect patients may be using unregulated medicines should encourage them to seek medical advice and obtain treatment only through registered healthcare providers and licensed pharmacies.

Working Together for Better Patient Care

The management of obesity increasingly requires collaboration between medical practitioners, endocrinologists, dietitians, pharmacists, psychologists and dentists.

Dental professionals have an important role in recognising medication-related oral complications, reinforcing preventive care and supporting patients as part of a multidisciplinary healthcare team.

Looking Ahead

The arrival of generic semaglutide is about far more than lower medicine prices. It signals a significant shift in how obesity and chronic metabolic diseases will be managed in South Africa.

For dentistry, this means keeping pace with evolving medicines, maintaining comprehensive medical histories and continuing to view oral healthcare as an integral part of overall health.

As more South Africans gain access to effective obesity treatment, dentists will increasingly encounter patients whose medical management is changing rapidly. Remaining informed and adopting a collaborative approach to care will help ensure that our profession continues to make a meaningful contribution to improving both oral and general health.

The future of healthcare is increasingly integrated—and dentistry has an important role to play.

SADA MEMBER LIFESTYLE BENEFITS





Mercedes-Benz



TANC

Yours in Oral Health

KC Makhubele

Chief Executive Officer

UPCOMING EVENTS

22
Aug

SADA AWARDS & GRADUAND GALA DINNER 22 August 2026



SADA

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CTICC

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55 Speakers

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