



Based on a sound foundation, ASAIPA celebrates its 21st year of service and support for its GPs

The year 2026 marks the 21st anniversary of ASAIPA, the Alliance of South African Independent Practitioner Associations, named by its founding CEO, the late Dr Lex Visser, as a consequence of a meeting of “homeless” GP leaders at OR Tambo Airport in 2005 after the collapse of its forerunning national IPA network, GPNet.

Co-incidentally, 2026 also marks the 10th anniversary of Dr Unben Pillay’s tenure as incumbent ASAIPA CEO...!

The closure of GPNet, as Bloemfontein-based Dr George Aldrich, Dr Visser’s close Oranjemed IPA colleague and founding ASAIPA director explained, left many of the country’s GPs with no national representative body: “Then the late Dr Visser, in conjunction with the former GPNet’s regional IPAs, launched ASAIPA with Lex as the CEO and the IPA chairpersons making up the first board of directors. Humble beginnings!

Humble beginnings indeed, co-founding director, Herman Kohloffel, of NIMPA, recalled: “The vacuum created by the collapse of GPNet, we realised, had left all the associated groupings in the lurch. Lex, who you might remember had also headed up NAIPA, the National Association of IPAs, before taking over at GPNet. He and I discussed the situation ad nauseum mainly in terms of what it would take to set up another association. This we did in the form of ASAIPA – in effect a resurgence of the NAIPA fold but in a different format.”

Challenge

Big challenge at the time, Herman noted, was to ensure that ASAIPA wouldn’t just become another informal association: “The association needed funding and to be formalised as a group properly. Only way to achieve this was through member fees. We needed a fulltime CEO but couldn’t afford the big salaries as they were at GPNet level. We also needed to start looking at the medical aids and contracts. Nonetheless, I took on the job as treasurer with Lex at the helm, drawing up contracts and setting up regular meetings. And that was essentially the mainstay of the ASAIPA start-up.”

Similar recollections have been shared with ASAIPA News4U by East Rand-based founding director, Dr Wessel Neuhoff, who made the point that there were no specific guidelines in place “and we had to invent rules and regulations as we went along.”

The IPAs, which had only been in existence for little more than a decade at the time, were largely regionally based and only developed as such: As Dr Neuhoff recalled when explaining developments on the East Rand: “The local East Rand IPA was not aligned with other groups, like GP Net, so we decided, during the nineties, to establish a different group for private family practitioners, namely Clinicross.”

Several Clinicross members, it will be remembered, were associated with the other national IPA grouping, the SA Managed Care Co-operative (SAMCC), but on Clinicross’ expiration, some had already joined GPNet which, in essence, became ASAIPA.

Dedication

Dr Visser’s dedication from the outset has been well documented, the fruits of his diligence clearly apparent in the endeavours and achievements of ASAIPA being able to protect private family practitioners through the years against exploitation by the funders and to help creating acceptable contracts and managed care models through the years.

But it was quite a challenge in the beginning: “ASAIPA,” said Dr Aldrich,” had to fight to gain face in the industry and to be recognized, not only by our competition, but by all the medical aids, administrators, representative bodies, and pharmaceutical companies as well. Through hard work, difficult negotiations and fighting our way forward, ASAIPA grew in stature and was within months the leading IPA Group in SA!”

KZN-based founding director. Dr Hugh Ackerman, has also attributed ASAIPA’s sustainability through the years to the early efforts of Dr Visser who he referred to as an “amazing man friend and mentor”: “He was a leader who pulled us all out of the darkness into the beginning of ASAIPA with a vision for the future of general practice in South Africa. He always said if every GP in SA would follow his advice for six months, he would rectify everything for the GPs of our beautiful country!”

Legacy

ASAIPA soon grew to 2000 members to have the biggest national footprint of all the IPA’s in South Africa. Dr Visser later co- formed the IPA Foundation with the SAMCC, ASAIPA, SPNet, and CPC Qualicare and became its first CEO. It was during this period that Dr Visser’s legacy was clearly endorsed, exemplifying his influence in provider/funder relations in particular.

As interim chairman of the IPA Leadership Forum in 2008, Dr Visser presided over discussions which led to an arrangement with Medscheme whereby newly designated IPA Forum doctors “will be properly remunerated” in a differentiated, scheme-specific manner according to mutually agreed tariffs.

When asked to comment on this development at the time, Dr Visser made a statement which had and still has a strong bearing on the principles upheld by ASAIPA today:

“The difference is that for the first time the representatives of Medscheme and the IPAs have met and are working together as a team. While each one obviously does represent a constituency, the primary goal of finding innovative solutions to the delivery of healthcare at cost effective, yet realistic fees, remains the central and ultimate goal of the Task Team. It is no longer so much a sectarian effort by two groups bent on protecting turf, but rather a combined initiative of a Task Team that concentrates on future common ground rather than historical differences”.

Reference to the Task Team here indirectly serves as a reminder that while most historical appraisals point to the early efforts of the late Dr Lex Visser, ASAIPA, as he himself acknowledged, would not have endured the early challenges – and be where it is today – without the support of his EXCO and Chairpersons ultimately to the benefit of the GPs in South Africa.

Lex Visser Lifetime Achievement Award

Dr Visser's memory was perpetuated in the ASAIPA National Medical Awards initiative in the form of the Lex Visser Lifetime Achievement Award, the citation being: "This prestigious award is given to an individual who has made, and continues to make, an outstanding contribution to improving health and healthcare for all South Africans. An individual who has given a productive lifetime of distinguished service to medicine."

First recipient in 2018 was, appropriately, one of the country's most iconic medical practitioners, Dr Chris de Muelenaere, Pretoria IPA stalwart since 2005 who has only just resigned (retired) from ASAIPA.

