

“Achieving a quality, equitable and sustainable health system”

Coming Soon



National Health Accounts Report 2013
Bermuda health system finance and expenditure for fiscal year 2011-2012



Visit our web site at www.bhec.bm for all our publications and updates

Perception and Reality

BHeC handles hundreds of queries and complaints about the health system from the community every year. Each one is handled efficiently to assist the stakeholder, and they present an opportunity to correct health system gaps. These are the major areas of queries and complaints we receive. Do they match your perception?

- Costs, fees & billing - the major area of concern (54% this year); it covers providers’ charges, insurance reimbursement, and insurance and system costs
- Employers’ health insurance - includes having a policy in place and employee deductions
- Quality of care - covers access to patient records, service availability locally, and professional clinical quality
- Insurers responsibilities - includes policy coverage, overseas access, professional eligibility, insurance options for retirees, unemployed and children, and legislation

Home Medical Services (HMS)

A year on from the start of its development, Home Medical Services (HMS) will be covered as Standard Hospital Benefit as of 1st October 2013.

This means that medical procedures delivered by approved agencies in a home setting will be covered as part of every insurance policy in Bermuda without co-pays.

The HMS benefit includes procedures such as:

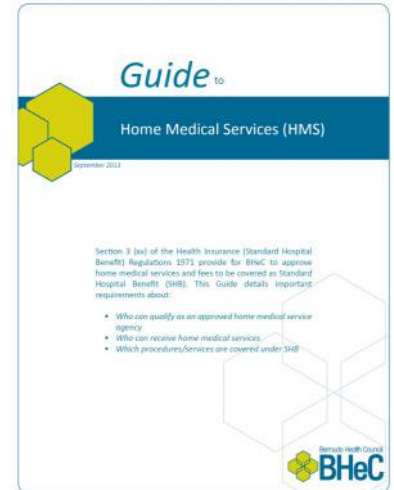
- IV therapy
- Pain management
- Nutrition therapy
- Wound care

It does not include services that can be done by a non-medical person, such as personal care or meal preparation. The purpose of the benefit is to ensure care is provided in the most appropriate, safe setting.

To be eligible for coverage, patients will have to be referred by a physician to a BHeC-Approved HMS Agency. The service must also:

- Be delivered by a registered nurse,
- Needed for less than four hours a day, for no more than 60 days,
- Be listed on the BHeC Home Medical Services Schedule, and
- Be pre-approved by the patient’s insurer.

Being a new benefit we anticipate a period of transition as providers and patients adjust, but we are confident that the process will prove worthwhile.



For full details about this new benefit visit our web-site: www.bhec.bm/professionals/fee-schedules/

Contact us on 292-6420 or healthcouncil@bhec.bm

BHeC Developments in Regulation

Employers: Enforcing employers’ obligation to provide health insurance for their employees has always been a priority for BHeC. We’ve now reached the culmination of two years’ work and secured initiation of legal action in cases where egregious breaches were found. In addition, two BHeC inspectors were appointed to facilitate enforcement.

Utilization: Given steep increases in claims for diagnostic testing, it has become evi-



dent that greater utilization management mechanisms are needed in our health system. We are exploring the introduction of clinical guidelines to inform decision

-making.
Professionals: BHeC monitors statutory bodies’ registration requirements and regulatory functions as per our Act, Section 5d. We are ramping up monitoring processes.
Technology: After four years development, approval has been secured to proceed with drafting instructions for Health Technology Reviews, a process that will control the entry of high risk medical equipment into the health system.