

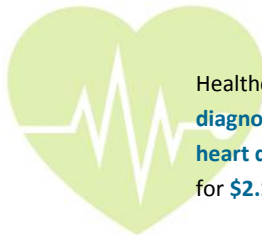
Health Costs Dashboard

In the first 3 quarters of FY2016:

Healthcare claims with a diagnosis for diabetes accounted for **\$11.5M**



Healthcare claims with a diagnosis for ischemic heart disease accounted for **\$2.1M**



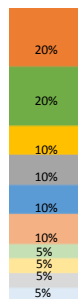
Healthcare claims with a diagnosis for influenza accounted for **\$39,348**



Complaints and Queries:

In April and May 2016 we received 26 queries about the following:

- Cost/fees/billing (4)
- Employer health insurance (4)
- Health legislation (2)
- Insurers Responsibilities (2)
- Professional registration (2)
- Quality of care (2)
- Careers in the health system (1)
- Data/statistics (1)
- Healthcare facility registration (1)
- Other (1)



We received 6 complaints: 2 about employer health insurance, and 4 about quality of care.

Contact us for more information:

T: 441-292-6420

E: healthcouncil@bhec.bm

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Enacting Section 13



The Minister of Health recently tabled legislation that seeks to strengthen patient protection by bringing into effect the Bermuda Health Council Amendment Act 2016. The amendment refers to Section 13 of the principle Act, governing the licensing of health businesses. There are 334 health service provider (businesses) in Bermuda and approximately 2,740 registered health professionals.

The amendment to Section 13 further strengthens patient protection and assures quality care. For example, it allows for better monitoring of health service providers, assists with health system planning and increases awareness of what health services are available. The amendment would also allow for better understanding of the quality of care provided, the degree to which high-risk

medical technology is safe and being maintained and assurances that services are delivered by appropriately registered and trained health professionals. This legislation also sets an expectation that if a provider refers a patient to a facility in which he or she has a financially-vested interest, this interest is declared and the referral is ethical and specific to the needs of the patient.

In short, the amendment to Section 13 would ensure that registered health service providers are credible administrators of health services, that all providers operate at consistently high standards and that care and safety are not compromised. These amendments will enhance confidence in the local health system and the ability of health providers to meet the specific needs of the public.

We know that the majority of health service providers care about their patients and want to promote quality care with good health outcomes. Their businesses run effectively and efficiently, delivering services that meet and often exceed best practice standards. The proposed legislation for Section 13 complements what exists within our health system, offering a way to ensure quality and safety standards and protect the interests of all stakeholders in the process. With better health care, comes better health outcomes.

Mammography results - protecting the public

The Council recently analyzed mammography rates because clinical guidelines for screening mammography changed internationally. As clinical guidelines shift, it is still recommended that women talk with their doctors about the benefits and harms of mammography, when to start screening and how often to be screened.

The data showed that use of screening mammography declined significantly during FY2016, by more than 25%. The reductions in screening came after public discussions and consultations with providers on best practices.

As screening mammography rates decline, diagnostic mammography rates remain stable. Diagnostic mammography is recommended for women who are experiencing symptoms that may be related to breast cancer.

